



CONNECTICUT COUNTS

Report on Homelessness
in Connecticut

MAY 2017



Thank you to our funders!

The Connecticut Coalition to End Homelessness would like to thank our funders for the 2017 Point-in-Time Count and Homeless 2017 CT Youth Count!

Point-in-Time Count Funders



Homeless 2017 CT Youth Count! Funders



Introduction

The Point-in-Time Count provides critical information each year about the scope of homelessness in Connecticut, and about the impact of our efforts to end it. The 2017 Count reflects the lowest-ever levels of homelessness in Connecticut since we started the statewide Count in 2007. This year's Count, continuing for a third year in a steady downward trend, shows clearly that Connecticut's investments to end homelessness and efforts to transform our homelessness response system are yielding success in ending this important, expensive problem.

Under the leadership of Governor Dannel P. Malloy, state and federal agencies, nonprofit providers, and our many partners in the statewide Opening Doors-CT effort are collaborating more closely than ever to end homelessness. We are using data to target resources and understand system performance, and working hard to implement evidence-based best practices across our state. The past three years have been a whirlwind of incredible activity at every level as we have truly transformed our system to coordinate access to all homeless resources, and to target our effort to serve those most in need, first.

Through this great teamwork, we have reached several major milestones: the federal government certified in 2015 that Connecticut was the first state in the nation to end chronic homelessness (the long-term homelessness of someone with a disability) among veterans, and in 2016, that Connecticut was one of the first two states to functionally end all homelessness among veterans. In December, 2016, our state became the first to match to a housing resource every single individual documented as chronically homeless.

Building on this momentum, we are committed to ending the homelessness of families with children and unaccompanied youth (under the age of 25) by 2020. Given those goals, this year's *2017 CT Youth Count!* of homeless and unstably housed youth is of particular significance, as it sets a baseline for our efforts as we seek to meet the needs of this exceptionally vulnerable population. We are particularly grateful to Microsoft and to Nutmeg Consulting, LLC for their generous donation of time and expertise to build pro bono the smartphone app that allowed us to complete this year's *2017 CT Youth Count!*

State, federal, and nonprofit partners in Connecticut are building together a homeless response system that is flexible, data-driven, and adequately resourced. Our goal is to make homelessness rare, brief, and one-time for anyone who faces it. Knowing our data – year-round, and through the Point-in-Time Count – is critical to understanding how we are doing, and how we can do better. We are grateful to the many sponsors, listed on the facing page, who made the Point-in-Time Count possible through their generous support. This effort also involves dozens of providers, and hundreds of volunteers who step up to help. We thank them all for supporting efforts to end homelessness in Connecticut.

Sincerely,



Executive Director
Connecticut Coalition to End Homelessness

Summary

Key Findings

On the night of January 24, 2017, **3,387** people were experiencing homelessness in Connecticut. This represents a **13% decrease** from last year and a **24% decrease** from 2007.

The number of individuals experiencing chronic homelessness (long-term homelessness and living with a severe disability) has **decreased, 60%** since 2014, **down 11%** since 2016.

Nearly **60%** of those counted as chronically homeless were in the process of securing permanent housing.

34 Veterans were identified in emergency shelter. This represents a **decrease of 24%** since last year. 14 Veterans were unsheltered – a **decrease of 67%** from last year.

4,396 youth under the age of 25 were estimated to be homeless or unstably housed, including 269 counted as literally homeless in the PIT.

392 families were experiencing homelessness, a **decrease of 13%** from 2016.

415 people were unsheltered, representing a **38% decrease** from last year.

2017 now represents the **lowest total ever** in a statewide CT PIT Count for Individuals, Families, Veterans, and Chronically Homeless since the first statewide count in 2007.

Purpose

Since 2005, the U.S. Department of Housing and Urban Development (HUD) has required communities to count and report the number of people experiencing homelessness on one night during the last ten days of January.

The Connecticut Coalition to End Homelessness (CCEH) leads communities across the state in conducting annual homelessness counts, mobilizing non-profits, local and state government agencies, and hundreds of private citizen volunteers to gather critical data to inform efforts to prevent and end homelessness.

This year was also HUD's baseline year to count for homeless youth. CCEH also led the *2017 CT Youth Count!* effort, separate from, but in conjunction with, the Point-in-Time Count.

To assist in this process, CCEH provided volunteers with mobile apps for both the PIT and *2017 CT Youth Count!* surveys that allowed for real-time data collection from the field and eliminated the need for paper surveys. Microsoft and Nutmeg Consulting, LLC generously donated their labor to build the *2017 CT Youth Count!* mobile app at no cost to CCEH or our partners.

The Connecticut Coalition to End Homelessness

The Connecticut Coalition to End Homelessness, in partnership with members and communities throughout the state, creates change through leadership, advocacy, and building the capacity of members and the field to respond to environmental challenges. Our collective mission is to prevent and end homelessness in Connecticut.

Contributing Staff

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Special Thanks

Special thanks to Microsoft and Nutmeg Consulting, LLC for their work on the Youth Count mobile app. We are grateful to Dr. Stephen Adair for his expertise and assistance on our youth count. We also thank the State of Connecticut Department of Housing, State of Connecticut Department of Mental Health and Addiction Services, Housing Innovations, CT HMIS Steering Committee, HUD Continua of Care, Simtech Solutions, and the hundreds of volunteers who make the CT PIT Count possible.

Acknowledgments

Many stakeholders in CT participated in the 2017 Point-in-Time Count. We are grateful to everyone for their hard work and wish to thank the following agencies for providing regional coordination this year:

- Access Community Action Agency
- BH Care
- Catholic Charities of Fairfield County
- Charlotte Hungerford Hospital Behavioral Health Center
- Columbus House, Inc.
- Community Renewal Team
- The Connection, Inc.
- Department of Mental Health & Addiction Services
- Department of Veterans' Affairs
- Emerge, Inc.
- Hartford Healthcare
- Inspirica, Inc.
- Journey Home
- Mid Fairfield AIDS Project
- New Opportunities, Inc.
- New Reach, Inc.
- Recovery Network of Programs
- St. Vincent DePaul Mission of Bristol
- St. Vincent DePaul Mission of Waterbury
- Supportive Housing Works
- Thames River Community Service, Inc.
- United Way of Southeastern CT
- Windham Regional Community Council

Questions

Any questions about the content of this report can be directed to Brian Roccapriore at broccapriore@cceh.org

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Section 1: CT PIT 2017 - Total Numbers

Findings

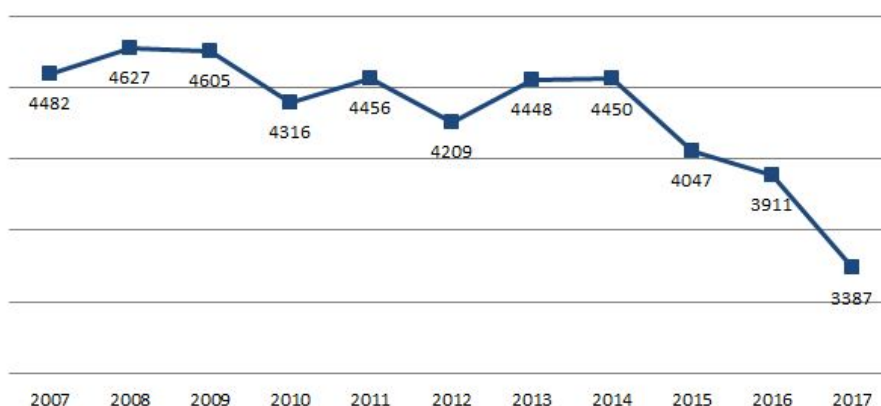
Statewide, 3,387 people were experiencing homelessness on the night of January 24, 2017: 2,249 in emergency shelter, 723 in transitional housing, and 415 unsheltered (Table 1). This represents an overall decrease of 13% statewide from last year. This also reflects a 24% statewide decrease since 2007 (the first year Connecticut conducted a statewide count).

Table 1: Sheltered and Unsheltered Population

Population	Number of Persons
Sheltered	
Adults in Families	456
Children in Families	720
Adult Individuals	1785
Unaccompanied Youth	11
Unsheltered	
Adults in Families	1
Children in Families	3
Adult Individuals	409
Unaccompanied Youth	2
Total Persons	3387

CT PIT 2017 is now the lowest total number of people experiencing homelessness counted during a Point-in-Time Count in CT (Figure 1).

Figure 1: Total Homeless Population Since 2007



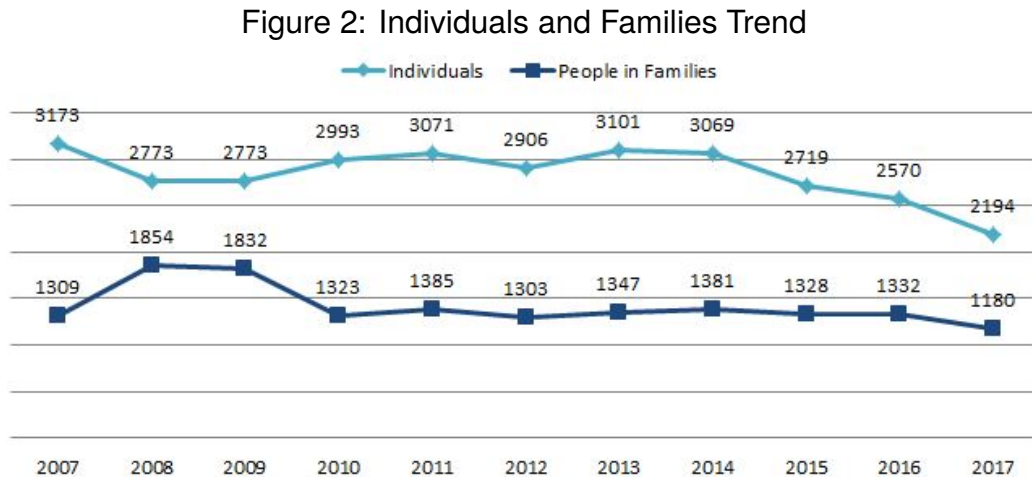
Individuals

On the night of the count, 2,194 individuals (over the age of 18 without an accompanying minor) were experiencing homeless. This is a 15% decrease from last year. The total number of sheltered and unsheltered individuals both decreased this year. Sheltered homelessness decreased 6% and unsheltered homelessness decreased 39% among individual adults.

Families

There were 1,180 people in families experiencing homelessness this year. This represents an 11% decrease from last year. The total number of homeless families counted was 392, a 13% decrease from the number of families counted last year.

Figure 2 illustrates the overall trend of individual and family homelessness in Connecticut.



For more information about homeless youth in Connecticut, please refer to Section 5.

Veterans

The total number of veterans counted as homeless in the PIT count decreased 12% from 2016. Of the total population of veterans experiencing homelessness, only 34 were counted in emergency shelter, 143 were counted in transitional housing, and 14 were unsheltered.

Connecticut was the first state certified by the federal government for ending chronic homelessness among veterans, and one of the first two states certified as ending homelessness among all veterans.

Ending veteran homelessness means Connecticut has built an enhanced homeless response system for veterans, through which we are quickly identifying veterans experiencing homelessness throughout the state. This system ensures that veterans are offered adequate shelter, provided rapidly with interim housing (when necessary), and assisted to secure permanent housing with appropriate supports within 90 days.

Section 2: CT PIT 2017 - Sheltered

Findings

Statewide, 2,972 people were in a homeless shelter or transitional housing project on the night of *CT PIT 2017*. Emergency shelters accounted for 2,249 people, while transitional housing accounted for 723. This is an overall decrease of 8% from last year: 5% decrease in shelter and a 17% decrease in people staying in transitional housing. Table 3 provides a detailed breakdown of the total sheltered population in CT.

The number of families in emergency shelter decreased 9% to 264 and the number of families in transitional housing was 127, a decrease of 19%. See Table 2 for a comparison of how the various sheltered populations have changed from *CT PIT 2016* to *CT PIT 2017*. Individuals in households with no dependent children accounted for 1,440 of the total sheltered population (a decrease of 3%).

Table 2: Percent Change by Population Type

Population	Percent Change from 2016-2017
Individuals ES	-3%
Individuals TH	-17%
Families ES	-9%
Families TH	-19%
Children ES	-9%
Children TH	-16%

Table 3: Population by ES and TH

Population	Emergency Shelter	Transitional Housing	Total
Total People	2249	723	2972
Individuals	1440	345	1785
Families	264	127	391
Children	498	233	731

Sheltered Subpopulations

Chronic Homelessness

The federal Department of Housing and Urban Development defines as “chronically homeless” a person who has a disability and (a) has experienced homelessness, as defined as living in a place not meant for human habitation, in an emergency shelter, or a safe haven for the last 12 months continuously, or (b) has experienced homelessness on at least four occasions in the last three years where those occasions cumulatively total at least 12 months.

This subset of the homeless population has high service needs and disabilities and who, if not provided with intensive housing assistance and supportive services, would likely remain homeless.

Of the 1,440 individual adults and 311 adults in families in emergency shelter, 248 were identified as chronically homeless. This represents 11% of all 2,241 adults in shelter and transitional housing. Starting in 2015, CT embarked on a concerted effort to end chronic homelessness through coordinated community efforts to identify and provide housing and supports to people in this category (more information on page 15).

Of the 798 people in families in emergency shelter, 33 were identified as part of chronically homeless families. This represents 3% of all 1,176 sheltered people in families. Section 4 of this report outlines, in detail, the total subpopulations captured on the night of *CT PIT 2017*.

Veterans

On the night of *CT PIT 2017*, a total of 34 veterans were in emergency shelter. This is a 24% decrease from last year and represents the lowest number of veterans in shelter in any CT Point-in-Time Count. There were 143 veterans in transitional housing on the night of the count. Table 4 shows the distribution of veterans in ES and TH projects.

Table 4: Veterans by ES and TH - Sheltered

Project Type	Number of Veterans
Emergency Shelter	34
Transitional Housing	143

Domestic Violence

18% of people in shelter or transitional housing report experiencing domestic violence. The total number of people who indicated this was 495.

Health and Safety Concerns

410 adults reported a severe mental illness this year, or 18% of the sheltered adult population.

191 or 8.4% of adults in shelter reported a severe drug or alcohol problem that impairs their ability to live independently.

42 people self-reported having HIV/AIDS. This represents 1.8% of sheltered adults.

Table 5 provides a snapshot of the total of all health and safety categories for the statewide sheltered population.

Table 5: Adults with Health and Safety Concerns - Sheltered

Serious Mental Illness		Chronic Substance Abuse		HIV/AIDS	
Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
410	18.0%	191	8.4%	42	1.8%

Additional Information

The numbers for the sheltered homeless population tend to reflect the current system capacity to provide emergency shelter and transitional housing beds. The addition or removal of a project can have a profound impact on various populations and subpopulations in the sheltered category.

Both the Balance of State and Opening Doors Fairfield County Continua of Care aligned themselves with the HUD priorities to repurpose transitional housing projects for permanent housing solutions. As a result, this is the second year in a row we see a decrease in the number of transitional housing beds across the state – a 13% decrease for 2017.

Please see Appendix A for a community-level breakdown of the sheltered population.

Methodology

Consistent and rigorous methodology ensures that the Connecticut PIT data are reliable and comparable across years and can be used to design effective interventions to help people experiencing homelessness. Connecticut has implemented a consistent and uniform statewide methodology for CT PIT implementation since 2008.

For a detailed description of the sheltered count methodology, please see Appendix C.

Section 3: CT PIT 2017 - Unsheltered

Background

The unsheltered count captures the number of people living in a place not meant for human habitation (such as in abandoned buildings, under bridges, or in parks). The following unsheltered count methodology section, as well as the more in-depth methodology explanation in Appendix C, clearly outlines the steps that we have taken to create a statistically reliable estimate of unsheltered people in CT.

Findings

On the night of the count, we estimate that 415 people were experiencing unsheltered homelessness. Of those, the vast majority, 98.6% or 409 people were single individuals. There was also 1 homeless family with 3 children. Overall, unsheltered homelessness was 38% lower this year as compared to 2016, and is the lowest unsheltered count ever in Connecticut. Table 6 shows the total breakdown of the unsheltered population in Connecticut while Figure 3 details the change in unsheltered homelessness over time.

Table 6: Unsheltered Population

Total Persons	415
Individuals	409
Families	1
Children*	5

*Includes 2 unaccompanied youth

Figure 3: Unsheltered Homelessness Population Since 2007



*Unsheltered counts occurred every other year until 2015

Unsheltered Subpopulations

Chronic Homelessness

Of the 409 adults who were living on the streets or in other places not meant for human habitation, 152 were estimated to be chronically homeless. This is an 18% reduction in the number of chronically homeless unsheltered adults from last year.

Veterans

Statewide, the number of unsheltered veterans decreased 67%. Only 14 veterans were estimated to be living on the streets or in other places not intended for human habitation; six of those veterans were estimated to be chronically homeless. There were no unsheltered veteran families identified on the night of *CT PIT 2017*.

Domestic Violence

There were 53 unsheltered people who reported having experienced domestic violence.

Health and Safety Concerns

Approximately 1 in 5 unsheltered adults (95 total) self-reported having a severe mental illness. This represents 23% of all unsheltered adults. Twelve percent (49 people) of the total unsheltered adults reported having severe substance abuse issues. Twenty-four people self-reported a diagnosis of HIV/AIDS. This represents 6% of unsheltered adults in CT. Table 7 details the total of health and safety concerns of the statewide unsheltered population.

Table 7: Adults with Health and Safety Concerns - Unsheltered

Severe Mental Illness		Chronic Substance Abuse		HIV/AIDS	
Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
95	23%	49	12%	24	6%

Additional Data

For a community breakdown of the unsheltered population, see Appendix B of this report.

Methodology - Unsheltered Count

The unsheltered homeless count followed similar, but updated, methodology as the counts conducted in 2011, 2013, 2015, and 2016. The process uses the U.S. Census block identification combined with areas in which persons experiencing homelessness were located in the previous count. This year, the state redrew the maps for canvassing census block groups to reflect the geographies of our coordinated service areas.

For a detailed description of the unsheltered count methodology, please see Appendix C.

Section 4: CT PIT 2017 - Subpopulations

HUD asks that Continua of Care provide data for eleven subpopulations of people experiencing homelessness. These categories not only help estimate the level of need for services targeted to those specific groups, they also track the progress toward ending homelessness for groups with the greatest need.

The categories for the 2017 Point-in-Time Count are:

- Chronically Homeless Individuals
- Chronically Homeless Families
- Total Persons in Chronically Homeless Families
- Chronically Homeless Unaccompanied Youth
- Chronically Homeless Individual Veterans
- Chronically Homeless Veteran Families
- Total Persons in Chronically Homeless Veteran Families
- Adults with a Serious Mental Illness
- Adults with a Chronic Substance Abuse Disorder
- Adults with HIV/AIDS
- Survivors of Domestic Violence

Data collected on PIT surveys inform the totals for each of the subpopulations. See Table 8 for the totals.

Table 8: Subpopulations Totals

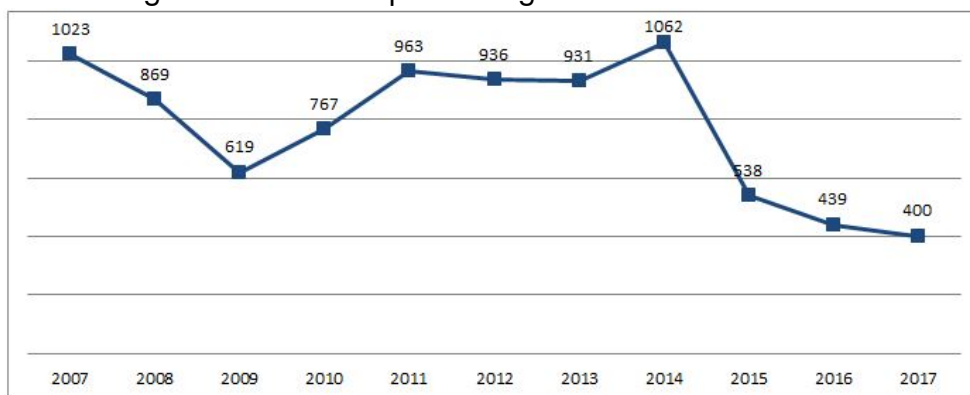
Subpopulation	Sheltered	Unsheltered	Total
Chronically Homeless Individuals	240	152	392
Total Chronically Homeless Families	8	0	8
Total Persons in Chronically Homeless Families	33	0	33
Chronically Homeless Unaccompanied Youth	0	0	0
Chronically Homeless Individual Veterans	7	6	13
Chronically Homeless Veteran Families	0	0	0
Total Persons in Chronically Homeless Veteran Families	0	0	0
Adults with a Serious Mental Illness	414	95	509
Adults with a Substance Use Disorder	180	281	461
Adults with HIV/AIDS	61	24	85
Adult Survivors of Domestic Violence	495	53	548

Chronically Homeless Subpopulations

In order to meet the federal definition, a chronically homeless person must have a disability and (a) have experienced homelessness, as defined as living in a place not meant for human habitation, in an emergency shelter, or a safe haven for the last 12 months continuously, or (b) have experienced homelessness on at least four occasions in the last three years where those occasions cumulatively total at least 12 months. This disabling condition must be of indefinite duration and impair the person's ability to live independently. HUD asks for the chronically homeless data to be segmented by Individuals, Families,

Youth, and Veterans. Figure 4 demonstrates the change in adults experiencing chronic homelessness since 2007. Please note this chart counts the 240 sheltered, 152 unsheltered individual adults, plus 8 sheltered adults in families.

Figure 4: Adults Experiencing Chronic Homelessness



Efforts to End Chronic Homelessness

In January, 2015, Connecticut's Reaching Home Campaign launched an effort to end chronic homelessness. In just two years, working together, providers across the state housed 1,441 chronically homeless individuals. Providers in Coordinated Access Networks across the state are working more closely together than ever before, coordinating their efforts, pooling their resources, and expediting housing for those most in need. These efforts are succeeding, as evidenced by falling numbers of CH. Nearly 60% of those counted in *CT PIT 2017* as chronically homeless were receiving assistance/in the process of securing permanent housing.

Individuals

The total number of individual adults estimated to be chronically homeless on the night of *CT PIT 2017* was 389. This represents an 11% decrease from last year and a 59% decrease since 2007 and is the lowest total ever in this category. Chronically homeless adults comprise 15% of the total homeless adults in CT this year.

Families

On the night of *CT PIT 2017*, Connecticut had an estimated 8 chronically homeless families comprised of 33 people. This represents 3% of the homeless families in CT. In order to count as a family, there must be one or more dependent children under the age of 18 accompanying the adult head of household.

Veterans

Thirteen veteran individuals were estimated to be experiencing chronic homelessness. There were no chronically homeless veteran families identified.

The state has the resources and systems in place to rapidly house any veteran experiencing chronic homelessness. Continued outreach efforts are made to those who are refusing the permanent housing interventions offered.

Domestic Violence

The number of people who reported experiencing domestic violence was 548. This represents 26% of all people who were homeless on the night of the count.

Health and Safety Concerns

Serious Mental Illness

The number of people who self-reported a serious mental illness was 505, or 19% of adults. Table 9 shows the total health and safety concerns across the state.

Chronic Substance Abuse

Adults who self-reported a chronic substance abuse disorder was 240 this year. This represents 9% of adults who were homeless on the night of *CT PIT 2017*.

HIV/AIDS

This year, the number of people who self-reported having HIV/AIDS was 66. This is 2% of homeless adults identified during the count.

Table 9: Adults with Health and Safety Concerns - Subpopulations

Serious Mental Illness		Chronic Substance Abuse		HIV/AIDS	
Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
505	19%	240	9%	66	2%

Section 5: 2017 CT Youth Count!

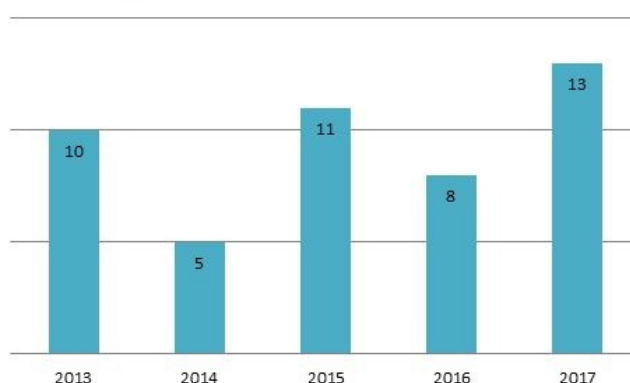
Introduction

A strong commitment to data and measurement has made Connecticut a leader in ending homelessness. Building off the success of the *2015 CT Youth Count*, the Connecticut Coalition to End Homelessness, in collaboration with partners across the state, conducted the *2017 CT Youth Count!*

On the night of January 24th, we estimate that there were 4,396 sheltered, unsheltered, and unstably housed youth in Connecticut. Working with the best practices identified by the “Voices of Youth Count (VoYC)” project led by Chapin Hall at the University of Chicago, lessons learned from the *2015 CT Youth Count*, and an expert demographer (Dr. Stephen Adair, Professor of Sociology at Central CT State University) to assist in the extrapolation of the collected surveys, Connecticut is continually improving the process of identifying and enumerating youth homelessness. The following sections outline the methods used to identify and survey homeless and unstably housed youth. Findings from the surveys collected are outlined in the data analysis section of this report beginning on page 21. A full methodology for the extrapolation can be found in Appendix C.

Though the Point-in-Time Count has been taking place annually for over a decade, the methodology is limited in its ability to accurately identify homeless youth. Figure 5 shows the total number of identified unaccompanied minors for the last five CT PIT Counts. The *2015 CT Youth Count* was an important foundation and played a role in developing the partnerships and strategies for the 2017 effort. The *2017 CT Youth Count!* used multiple methods to improve our ability to capture these youth, including strategies from the “Voices of Youth Count” and an innovative school engagement effort developed in CT.

Figure 5: Number of Unaccompanied Youth Identified by Traditional PIT Count Methodology, 2013-2017



Youth Engagement Team Initiatives (YETIs) were the driving force behind the *2017 CT Youth Count!* and brought together stakeholders from their community to work toward ending youth homelessness in their region. YETIs formed as an effort to bring together community stakeholders and incorporate schools, local government, the Department of Child and Families (DCF), housing providers, and youth serving agencies to lead their regional *2017 CT Youth Count!* and to coordinate local efforts to end youth homelessness

by 2020. Organizing around this common mission allowed the providers and advocates to share essential resources and information that made the Count, as well as their daily work, more effective at serving homeless and unstably housed youth.

Youth and young adults are a particularly difficult population of homelessness to identify. They are less likely to self-identify as homeless or seek out services for a variety of reasons. CCEH and the Reaching Home Youth Count Working Group sought to incorporate in the *2017 CT Youth Count!* methodology, many ideas from the VoYC guidebook, and as much input from youth and young adults with lived experience as possible. Our goal was to make sure the survey was person-centered and trauma-informed as well as to improve the effectiveness of counting strategies.

In addition to contributing data that will be implemented to inform resource allocation and improve programs, the *2017 CT Youth Count!* spurred the development of the YETIs toward collaborative regional planning to end youth homelessness by 2020.

Methodology

Background and Sources

In order to uphold rigorous standards in data collection, the *2017 CT Youth Count!* methodology follows the Department of Housing and Urban Development (HUD) guidelines and recommendations and is partially developed from the annual Point-in-Time count methodology in addition to incorporating emerging best practices from the VoYC guidebook. As of this year, HUD is requiring data collected specifically around youth and young adults, and resource allocation on a federal level may be impacted by this information. The *2015 CT Youth Count* and reporting from providers has demonstrated that the traditional methods of counting homeless individuals and families through adult-focused street outreach and shelter counts does not accurately reflect the number of youth experiencing homelessness. As we know from the 2013 “Invisible No More” study on runaway and homeless youth in CT, and other research, homeless youth are often more hidden and do not appear in our adult social service programs. Additional strategies built off of the traditional Point-in-Time Count methodology address this gap.

Community partners used research from scholarly work, feedback from the experiences of previous counts, and input from youth with lived experience to develop an effective strategy for addressing the barriers to identifying homeless and unstably housed youth and young adults.

Survey and Surveying Tool

Through the surveys, we sought to collect data on two main components: information about an individual’s housing status (according to a definition of youth homelessness per the McKinney-Vento Act), and the HUD required information regarding demographics and homeless status. The McKinney-Vento Act defines as “homeless” any youth who lack a fixed, regular, and adequate nighttime residence, whereas HUD defines as “homeless” only those youth who live in a place not meant for human habitation, emergency shelter, transitional housing, or hotels paid for by a government or charitable organization.

Volunteers were able to access the *2017 CT Youth Count!* survey via a mobile app, developed pro bono through a partnership with Microsoft and Nutmeg Consulting, LLC. Volunteers downloaded the app onto their smart phones and tablets and could turn devices toward the youth being surveyed for several of the questions which were determined to be particularly personal and private. Some surveys were administered through paper forms for a variety of reasons, such as safety concerns or language barriers, and entered into the app after speaking with the youth.

Counting Strategies

There are several strategies that each YETI implemented throughout the *2017 CT Youth Count!* week to reach as many young people as possible. These strategies included school engagement, “Come and Be Counted” locations (sites accessible to youth), organizational connections, and hotspots (places in communities known to be gathering spots for homeless youth). Volunteers were an essential part of the *2017 CT Youth Count!* Over 300 volunteers registered to participate and assisted in organizing routes and administering the survey at organizations, “Come and Be Counted” sites, and homeless youth hotspots. All volunteers who administered the survey underwent training and received direction by their YETI team leadership.

Point-in-Time Count

HUD and its federal partners established 2017 as the baseline year for measuring progress in ending youth homelessness in the context of the Point-in-Time (PIT) count. *CT PIT 2017* took place on January 24th, and counted both sheltered and unsheltered homelessness in Connecticut. The traditional PIT count includes a census of youth and young adults who are staying in a shelter or are identified by volunteers as living in a place not meant for human habitation on the night of the 24th. This counting strategy adopted known location and blitz counting sampling strategies comparable to previous PIT counts in the state. In addition to the traditional PIT count, however, an extended period of one week was added for the *2017 CT Youth Count!* to enhance the accuracy of the picture of both homeless and unstably housed youth. The strategies for this week are described below:

School Engagement

Schools are an important partner in identifying and engaging youth. Each YETI outreached to engage the McKinney-Vento liaisons within their region to connect with the school systems and determine where youth were already identified. Under federal law, McKinney-Vento liaisons are responsible for identifying homeless and unstably housed youth and young adults in the school system and connecting them to resources in their area.

Districts vary on how they interpret laws and policies regarding whether a youth homelessness survey can be administered in schools, due to the self-identifying nature of the information. While some schools were open to allowing for guidance counselors or other staff to administer the survey on site, others restricted surveying to locations off the school premises. Counselors and liaisons also assisted in directing identified students to “Come and Be Counted” locations, and helped advertise the Count through informational posters and word of mouth.

Come and Be Counted Locations

A “Come and Be Counted” location is a place where volunteers were stationed for certain periods of time to administer the *2017 CT Youth Count!* survey to youth and young adults. These locations could be libraries, coffee shops, local restaurants, or hang out spots near high schools or community colleges. Times and locations were advertised through communications materials within schools or at key locations where unstably housed youth might gather.

Organizational Connections

Youth serving organizations across the state joined the *2017 CT Youth Count!* effort by administering the survey to youth accessing their services. These organizations included Youth Service Bureaus, regional DCF offices, Runaway and Homeless Youth providers, Street Outreach programs, and juvenile and young adult services (Access Centers, LGBTQ support services, and other regional entities that work with youth and young adults). Some organizations administered the survey to youth who participated in their programs while others served as ongoing “Come and Be Counted” locations that youth could visit throughout the week.

Hotspots

Hotspots are indoor or outdoor locations where youth and young adults tend to congregate. With the help of youth, YETIs utilized mapping tools, such as Google Maps, to pin these locations and create routes to survey homeless and unstably housed youth at these hotspots. Regions collected information from outreach teams or focus groups of youth with lived experience to determine the optimal locations to administer surveys. YETI leaders then deployed volunteer teams to these hotspots to administer the *2017 CT Youth Count!* survey.

Data Analysis

Survey data collected through the *2017 CT Youth Count!* Microsoft app allowed CCEH to compile demographic and other data elements to provide a comprehensive picture of youth homelessness across the state. This data can now be used for targeted resource allocation, advocacy for funding, and an overall better understanding of Connecticut’s homeless and unstably housed youth. The summary report and regional reports on the information collected will be used by the Reaching Home Campaign Youth Working Group and by YETIs in developing plans to end youth homelessness and improve services to this vulnerable population.

Demographics

Data collected from the *2017 CT Youth Count!* indicate that the majority of homeless and unstably housed youth are 18-24 years old. Of the youth surveyed, 74% were over 18. Fifty-two percent were male and 43% were female. The average age of respondents was 20. Twenty-three percent of youth also identified as LGBTQIA (Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual). See Table 10 for more details.

Table 10: Demographic Percentages

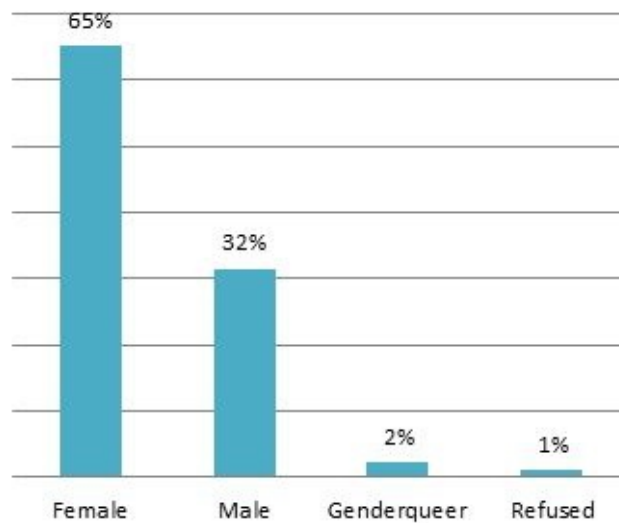
		Percentage
Age	14 and Under	4%
	15-17	22%
	18-20	33%
	21-24	41%
Gender	Male	52%
	Female	43%
	Unknown	2%
	Transgender	2%
	Genderqueer	1%
Sexual Orientation	Straight	71%
	Bisexual	13%
	Gay	6%
	Refused	5%
	Pansexual	3%
	Unknown	1%
	Asexual	1%

Twenty-three percent of youth indicated they were parenting or pregnant. The overwhelming majority of youth who fall into this category are between the ages of 18 and 24. Table 11 details the percentages of youth who were pregnant or parenting when surveyed for the count. Figure 6 provides the gender of youth who reported pregnancy or being parents.

Table 11: Pregnant or Parenting Youth

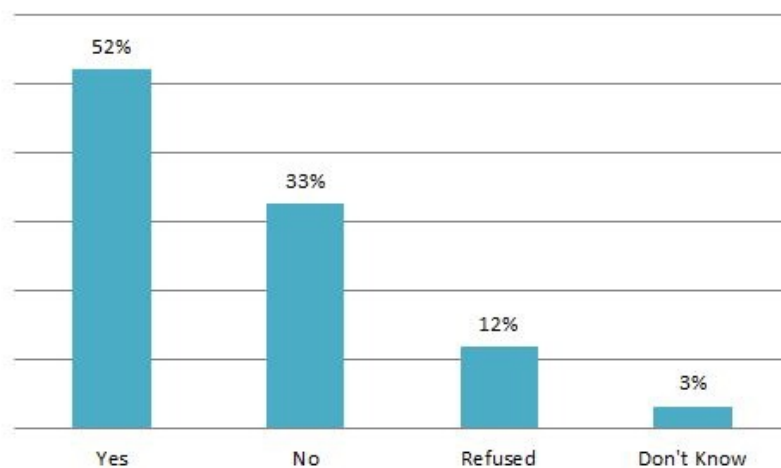
Pregnant or Parenting Youth		Percentage
Pregnant or Parenting Youth	No	77%
	Yes	23%
Age Grouping of P/P Youth	18-24	87%
	Under 18	13%

Figure 6: Genders of Pregnant or Parenting Youth



This year, the survey included a follow up question for those who are parenting that asked if the respondent had custody of their child or children. Only 52% of youth who were parenting indicated they had custody. When reviewing the data by gender, 70% of females, but only 17% of male youth reported having custody. Figure 7 displays the overall custody rate among youth.

Figure 7: Overall Custody Rate



Race/Ethnicity

The majority of homeless and unstably housed youth were African American (40%), followed closely by Caucasian (38%). Figure 8 provides more detail about the race categories of respondents. Additionally, 37% of surveyed youth identified as Hispanic. See Figure 9.

Figure 8: Race

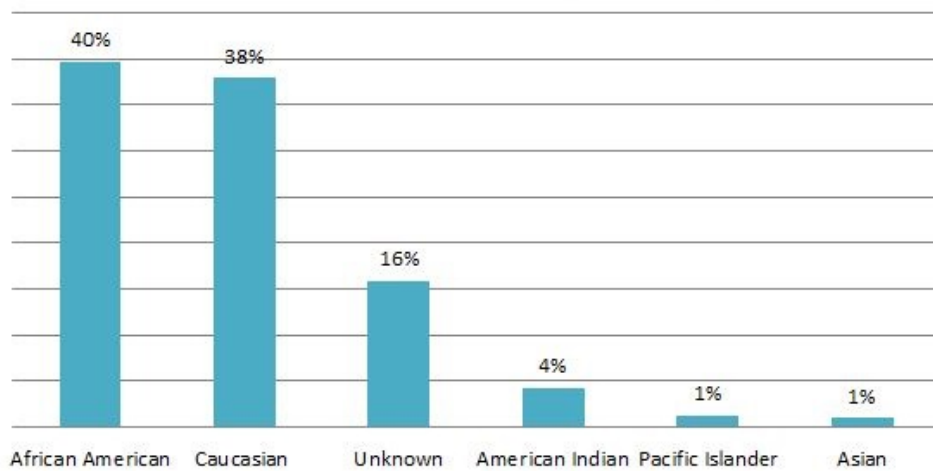
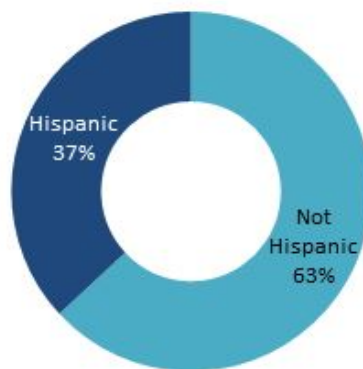


Figure 9: Ethnicity



Living Arrangements

When asked where they slept on the night of January 24th, the CT PIT Count night, the majority of homeless and unstably housed youth were staying with a friend. The second highest number of unstably housed youth were staying with their parents, but data around their number of moves and safety concerns indicated issues with the stability of staying with parents. Table 12 details the total percentages of substantive responses to the living situation question.

Table 12: Living Situation of Homeless and Unstably Housed Youth*

Location	Percentage
Friend's Home	18.0%
Parent's Home	16.2%
Transitional Housing	13.2%
Couch Surfing	10.2%
Other Relative's Home	9.7%
Shelter	8.5%
Boyfriend or Girlfriend's Home	6.5%
Other	3.7%
Outside	3.2%
Hotel I'm Paying	2.5%
Hotel Charity is Paying	2.0%
Vehicle	1.5%
Abandoned Building	1.0%
Refused	0.7%
24-hour Business	0.5%
Foster Family Home	0.5%
Group Home	0.5%
Residential Trtmnt Facility	0.5%
Don't Know	0.2%
Hospital	0.2%
Juvenile Detention or Jail	0.2%
Train-Bus Station	0.2%

*responses from survey questions indicated instability in current living situation

Of the homeless or unstably housed surveyed, 75% of youth reported that they feel safe where they're currently living and 17% reported feeling unsafe. Table 13 shows the total responses to the question of safety.

Table 13: Safety

Feel Safe	Percentage
Yes	75%
No	17%
Don't Know	4%
Refused	4%

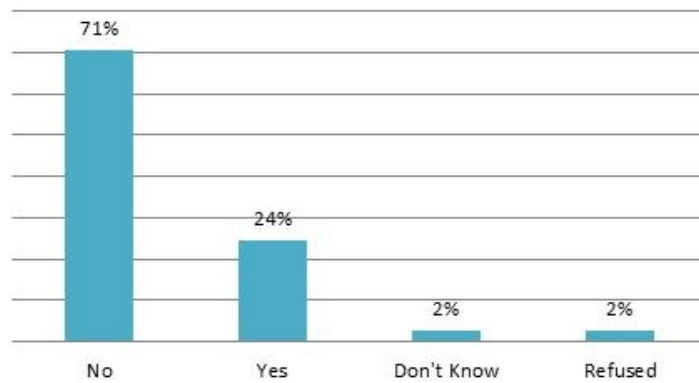
This year, a new question asked the length of time a person was staying in the current living situation. Table 14 details the percent of substantive responses and how they measured the length of time in their current situation.

Table 14: Length of Stay

How Long Staying	Percentage
Days	18%
Weeks	28%
Months	38%
Years	16%

A follow up to how long someone has been in their current living situation is a question asking if the person can stay where they are for as long as they'd like. The overwhelming majority of the answers to that question was "no" (71%). See Figure 10 for more details.

Figure 10: Ability to Stay in Current Living Situation



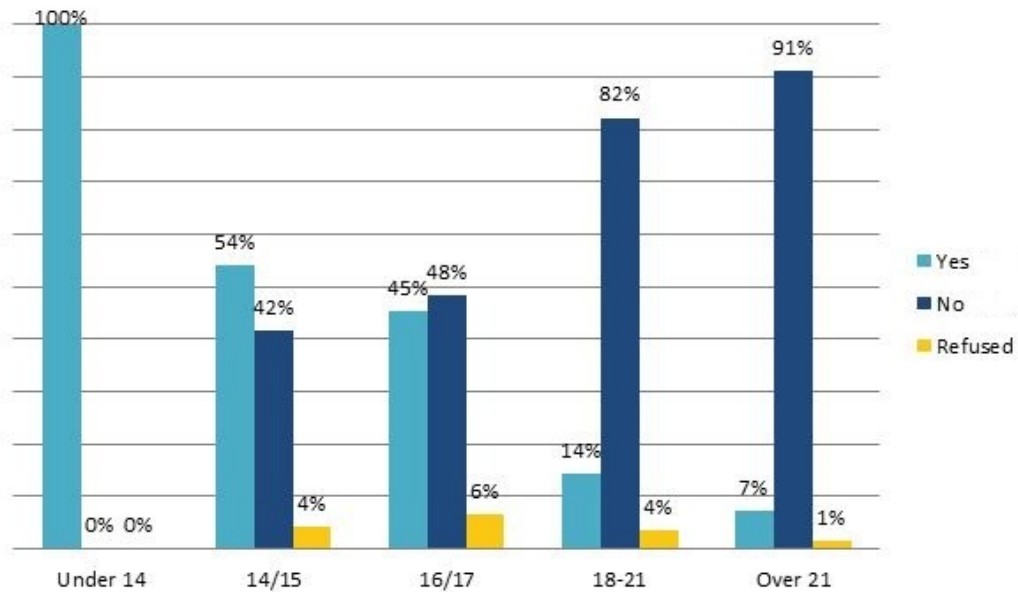
The survey also asked how many times a youth moved in the last 60 days. Table 15 indicates the breakdown of moves by 0, 1, 2, 3, or 4 or more times.

Table 15: Number of Moves

Number of Moves in 60 Days	Percentage
0	13.5%
1	29.7%
2	25.2%
3	12.0%
4+	17.7%
Don't Know	1.7%
Refused	0.2%

Another new question this year asked if the youth who moved in the last 60 days moved with their parent or guardian. Figure 11 illustrates the percentages of those who moved with and without their parents.

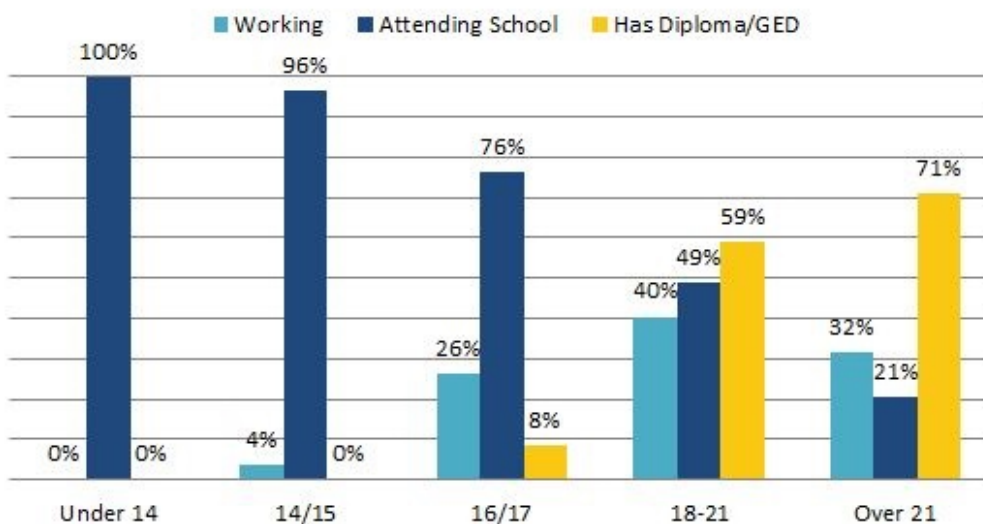
Figure 11: Moved With Parents (Yes, No, Refused)



Education and Employment

The lack of a stable living environment can have a devastating impact on educational and employment success for youth. Figure 12 profiles the percentage of youth by age who are currently working, currently in school, and those who have completed their high school education. Fifty percent of respondents reported receiving some form of government assistance. One percent of youth reported serving in the US Military.

Figure 12: Education and Employment



System Engagement

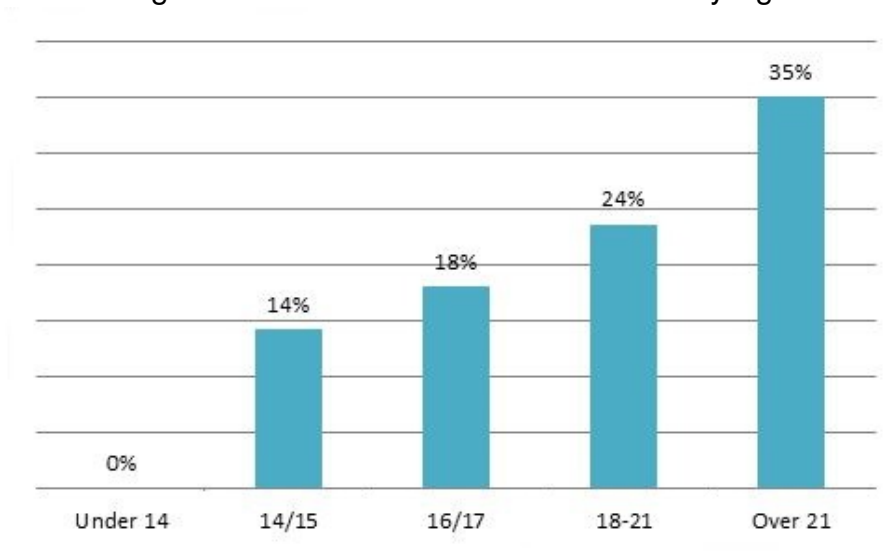
Forty-three percent of homeless or unstably housed youth reported involvement with the Department of Children and Families (DCF) or Foster Care. See Table 16. National studies have shown that foster care and involvement in the child welfare system are significant predictors of future episodes of homelessness. According to USICH in the Opening Doors: Federal Strategic Plan to End Homelessness¹: “Every year, 30,000 youth age out of foster care and 20,000-25,000 age out of the juvenile justice system. Most have limited options for housing, income, and family or other social support.”

Table 16: DCF or Foster Care

DCF or Foster Care	Percentage
Yes	43%
No	52%
Don't Know	4%
Refused	1%

Homelessness is a national problem among the prison re-entry population, with one out of every five previously incarcerated individuals experiencing homelessness shortly after they are released. Of the youth surveyed, on average about one in four had contact with the criminal justice system. See Figure 13 for a breakdown of criminal justice involvement by age group.

Figure 13: Criminal Justice Involvement by Age



Health and Safety

The *2017 CT Youth Count!* also asked questions related to health and safety concerns. This category included questions about reasons for being unsheltered, trading sex for basic necessities, disabling conditions, and HIV/AIDS.

¹https://www.usich.gov/resources/uploads/asset_library/FactSheetYouth.pdf

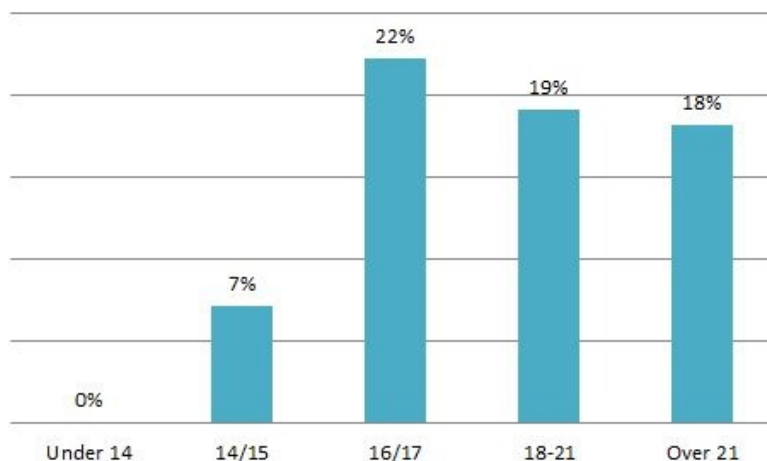
Of the literally homeless youth, only 35% tried to seek services at an emergency shelter. When asked why they didn't seek shelter, there were a variety of answers. Table 17 shows the reasons they provided and the percentage of youth who provided those answers.

Table 17: Reason For Not Seeking Shelter

Reason for Not Seeking Shelter	Percent
Thought I Could Make It On My Own	24%
Didn't Like Shelter Staff Treatment	18%
Heard Shelter Was Dangerous	18%
Shelter Was Full	12%
Would Stay in Shared Apartments	12%
Didn't Want Anyone Knowing I'm Homeless	6%
Heard Shelter Was Dirty	6%
Unknown	6%

The next health and safety question asked youth if anyone ever “encouraged/pressured/forced you to exchange sexual acts for money, drugs, food, place to stay, clothing or protection” in an effort to determine the prevalence of sex trafficking among this population. Overall, 18% of the homeless and unstably housed youth indicated they had this experience: 29% among females and 8% among males. When breaking down the data by age range, 16-17 year olds have the highest number of positive responses. Figure 14 outlines the age breakdown for those who said “yes” to this question. Of those who answered “yes”, 12% said that they were currently in that situation.

Figure 14: Encouraged/Coerced to Exchange Sexual Acts for Money, Drugs, Food, Place to Stay, Clothing, or Protection by Age



In an effort to determine if any youth met the federal Department of Housing and Urban Development definition of chronic homelessness, surveyors asked youth whether or not they had a chronic health condition, physical disability, severe mental illness, learning disability, or a chronic substance abuse issue. Forty-one percent of youth said “yes” to having one of the conditions listed. Additionally, 1% of youth indicated they had a diagnosis of HIV or AIDS. Reviewing this data, in conjunction with data regarding length of time homeless, we found that two of the homeless youth surveyed met the HUD definition for chronic homelessness.

Well Being

During the *2017 CT Youth Count!* volunteers asked homeless youth what they felt led to their homelessness. Table 18 indicates the reasons provided and percentage of youth who fell into each category.

Table 18: Reason for Homelessness

Reason for Homelessness	
Reason	Percentage
Conflict with Family	15%
Asked to Leave	10%
Couldn't Pay Rent	8%
Refused	8%
Don't Know	6%
Couldn't Find/Lost Job	6%
Drug/Alcohol Abuse	6%
Eviction or Risk of Eviction	4%
Household Breakup	3%
Aged out of Foster Care	3%
Family Violence	2%
Significant Other Violence	2%
Physical Abuse	2%
Pregnant/Had Child	1%
Illness	1%
Foreclosure	1%
Human Trafficking	1%
Released from Mental Health Facility	1%
Gender Identity	1%

The final question asked homeless youth what assistance would improve their well being. Table 19 provides the details of those answers.

Table 19: Improve Well Being

Improve Well Being	
Category	Percentage
Transportation	27%
Place to Live Long Term	18%
Employment/Career Help	12%
ID Card	5%
Help with School	4%
Financial Assistance	3%
Place to Live Short Term	3%
Food	3%
Place to Do Laundry	2%
Counseling	2%
Legal Help	1%
Place to Shower	1%
Birth Certificate	1%
Help to Go Home	1%
Language Classes	1%
Medical Services	1%

Survey Collection

Table 20 shows the details of where all of the surveys were collected.

Table 20: Surveys Collected by City

City	Percentage
Bloomfield	0.2%
Bridgeport	11.0%
Bristol	2.5%
Colchester	0.5%
Danbury	12.0%
Danielson	0.5%
Darien	0.2%
East Hartford	1.7%
East Haven	0.2%
Enfield	0.5%
Gales Ferry	0.2%
Griswold	0.2%
Groton	0.2%
Hamden	0.2%
Hartford	13.7%
Lebanon	0.5%
Ledyard	0.7%
Lisbon	0.2%
Manchester	1.2%
Meriden	3.2%
Middletown	0.2%
Moosup	0.5%
Naugatuck	0.2%
New Britain	2.5%
New Haven	7.0%
New London	6.5%
New Milford	0.2%

City	Percentage
Newington	0.2%
North Stonington	0.2%
North Windham	0.2%
Norwalk	3.0%
Norwich	6.7%
Preston	0.2%
Putnam	0.5%
Ridgefield	0.5%
Salem	0.2%
Seymour	0.2%
Shelton	0.2%
Southington	0.2%
Stamford	4.7%
Sterling	0.2%
Storrs	0.2%
Stratford	0.5%
Taftville	0.7%
Thompson	0.2%
Torrington	0.2%
Torrington	3.7%
Wallingford	0.2%
Waterbury	4.2%
West Hartford	0.7%
Wethersfield	1.5%
Willimantic	2.0%
Willington	0.2%
Winsted	0.2%

Definitions and Acronyms

Chapin Hall Voices of Youth Count (VoYC) Guidebook: Led by Chapin Hall at the University of Chicago, Voices of Youth Count (VoYC) is a national initiative designed to fill gaps in the nation's knowledge about the scope and scale of youth homelessness, as well as the life circumstances and experiences of runaway, unaccompanied homeless and unstably housed youth between the ages of 13 and 25 years old.

Chronically Homeless (CH): A person must have a disability and (a) have experienced homelessness, as defined as living in a place not meant for human habitation, in an emergency shelter, or a safe haven for the last 12 months continuously, or (b) have experienced homelessness on at least four occasions in the last three years where those occasions cumulatively total at least 12 months.

Continuum of Care (CoC): The group organized to carry out the responsibilities required under the CoC Program Interim Rule (24 CFR Part 578) and is comprised of representatives of organizations, including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, and law enforcement, and organizations that serve homeless and formerly homeless persons to the extent that these groups are represented within the geographic area and are available to participate.

Coordinated Access Network (CAN): A standardized assessment and referral process to access community resources within a geographic region for people experiencing a housing crisis or homelessness.

Department of Children and Families (DCF): Established in 1969, the Connecticut Department of Children and Families works together with families and communities to improve child safety, ensure that more children have permanent families, and advance the overall well-being of children.

Domestic Violence (DV): Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

Emergency Shelter (ES): Any facility, the primary purpose of which is to provide temporary or transitional shelter for the homeless in general or for specific populations of the homeless.

Episode: A period of homelessness.

Family: A group of people that present themselves together with at least one dependent child under the age of 18.

Individual: A person 18 years of age or older who presents for services alone.

Invisible No More Study: A year-long study published in 2013 led by The Consultation Center at the Yale University School of Medicine, that included input from 98 young people who are or have been homeless. The study found that such youth often are not connected to services, and populations within the youth who are most vulnerable to housing insecurity are LGBT, trafficked, and/or have some involvement with the juvenile justice or child welfare systems. Young men and boys of color are also especially vulnerable, according to the study.

McKinney-Vento Act: The McKinney-Vento Homeless Assistance Act is the primary piece of federal legislation authorizing homeless assistance and governing the educational rights of children and youth experiencing homelessness.

Occasion: A period of homelessness.

Parenting Youth: A person under the age of 25 caring for a dependent child.

Permanent Supportive Housing (PSH): A form of housing offered at low, affordable rent. Tenants are provided services to help them build independence. There is no time limit on how long a person can stay.

Place Not Meant for Human Habitation: Abandoned buildings, under bridges, in a park, in a car, and similar.

Provider: Oversees projects that offer services to people experiencing homelessness.

Self-Reported: A person who identifies as having a certain condition or status. The condition or status is not necessarily verified with documentation.

Serious Mental Illness: A diagnosable mental, emotional, or behavioral disorder that meets criteria to determine functional impairment.

Severe Disability: Must have at least one of the following disabilities that impairs the ability to live independently: physical disability, developmental disability, mental health condition, HIV/AIDS, chronic health condition, and substance abuse.

SubContinuum of Care (SubCoC): Former Continua of Care providing localized planning in conjunction with the CoC.

Subpopulation: A specific demographic characteristic within the entire population.

Transitional Housing (TH): A project that has as its purpose facilitating the movement of homeless individuals and families to permanent housing within a reasonable amount of time (usually 24 months).

Unaccompanied Homeless Youth: An individual person under the age of 25 experiencing homelessness.

Unaccompanied Minor: An individual person under the age of 18 experiencing

homelessness.

Unsheltered: Living in a place not meant for human habitation.

U.S. Department of Housing and Urban Development (HUD): Established in 1965, HUD's mission is to increase homeownership, support community development, and increase access to affordable housing free from discrimination. To fulfill this mission, HUD will embrace high standards of ethics, management and accountability and forge new partnerships — particularly with faith-based and community organizations — that leverage resources and improve HUD's ability to be effective on the community level.

Veterans: A person who served in the US military.

Youth: Anyone under the age of 25.

Youth Engagement Team Initiatives (YETI): Groups formed to bring together community stakeholders, schools, local government, youth serving agencies, and other parties interested in expanding the community network and collaboration to end youth homelessness.

Appendix A: *CT PIT 2017 Sheltered Tables*

Appendix A: Table 1.

Total Persons, Families Counted in Emergency Shelters and Transitional Housing Statewide

Population	Number of Persons	Percent of Total Persons
Children in Families	720	24.2%
Adults in Families	456	15.3%
Single Adults	1785	60.1%
Unaccompanied Children under 18	11	0.4%
Total Persons	2972	100%
Number of Families		391

Appendix A: Table 2a.

Number of Persons in Emergency Shelter and Transitional Housing, by Continuum of Care (CoC)

State / Continuum of Care / Subcontinuum	Children in Families	Adults in Families	Single Adults	Unaccompanied Youth under 18	Total Persons
Balance of State	511	317	1447	1	2276
Opening Doors Fairfield County	209	139	338	10	696
State Total	720	456	1785	11	2972

Appendix A: Table 2b.

Number of Persons in Emergency Shelter and Transitional Housing, by Subcontinuum (SubCoC)

BOS: Bristol	4	3	16	0	23
BOS: Danbury	15	10	85	0	110
BOS: Hartford	92	55	447	0	594
BOS: Middlesex	15	16	60	0	91
BOS: New Britain Sub-CoC	33	19	92	0	144
BOS: New Haven	141	81	275	1	498
BOS: Norwich/New London Co.	60	40	108	0	208
BOS: Waterbury	21	13	106	0	140
BOS: Remainder	130	80	258	0	468
ODFC: Bridgeport	104	64	160	3	331
ODFC: Norwalk	32	24	83	0	139
ODFC: Stamford-Greenwich	73	51	95	7	226

Appendix A: Table 3a.

Percent of Persons in Emergency Shelters and Transitional Housing, by CoC

State / Continuum of Care / Subcontinuum	Percent of Children in Families	Percent of Adults in Families	Percent of Single Adults	Percent of Unaccompanied Youth under 18	Percent of Total Persons
Balance of State	71.0%	69.5%	81.1%	9.1%	76.6%
Opening Doors Fairfield County	29.0%	30.5%	18.9%	90.9%	23.4%
State Total	100.0%	100.0%	100.0%	100.0%	100.0%

Appendix A: Table 3b.

Percent of Persons in Emergency Shelters and Transitional Housing, by SubCoC

BOS: Bristol	0.56%	0.66%	0.90%	0.00%	0.77%
BOS: Danbury	2.08%	2.19%	4.76%	0.00%	3.70%
BOS: Hartford	12.78%	12.06%	25.04%	0.00%	19.99%
BOS: Middlesex	2.08%	3.51%	3.36%	0.00%	3.06%
BOS: New Britain Sub-CoC	4.58%	4.17%	5.15%	0.00%	4.85%
BOS: New Haven	19.59%	17.77%	15.42%	9.09%	16.76%
BOS: Norwich/New London Co.	8.33%	8.77%	6.05%	0.00%	7.00%
BOS: Waterbury	2.92%	2.85%	5.94%	0.00%	4.71%
BOS: Remainder	18.06%	17.54%	14.45%	0.00%	15.74%
ODFC: Bridgeport	14.44%	14.04%	8.96%	27.27%	11.14%
ODFC: Norwalk	4.44%	5.26%	4.65%	0.00%	4.68%
ODFC: Stamford-Greenwich	10.14%	11.18%	5.32%	63.64%	7.60%

Appendix A: Table 4a.

Number of Families in Emergency Shelters and Transitional Housing, by CoC

State / Continuum of Care / Subcontinuum	Number of Families	Percent of Total Families
Balance of State	279	71.4%
Opening Doors Fairfield County	112	28.6%
State Total	391	100.0%

Appendix A: Table 4b.

Number of Families in Emergency Shelters and Transitional Housing, by SubCoC

BOS: Bristol	3	0.8%
BOS: Danbury	10	2.6%
BOS: Hartford	50	12.8%
BOS: Middlesex	10	2.6%
BOS: New Britain Sub-CoC	18	4.6%
BOS: New Haven	66	16.9%
BOS: Norwich/New London Co.	36	9.2%
BOS: Waterbury	12	3.1%
BOS: Remainder	74	18.9%
ODFC: Bridgeport	47	12.0%
ODFC: Norwalk	21	5.4%
ODFC: Stamford-Greenwich	44	11.3%

Appendix A: Table 5a.

Regional Breakdown of Chronically Homeless (CH) Single Adults in Shelter, by CoC

State / Continuum of Care / Subcontinuum	Number of CH Single Adults	Percent of All Sheltered CH Single Adults in State	Percent of Each Region's Total Single Adults
Balance of State	208	86.7%	14.4%
Opening Doors Fairfield County	32	13.3%	9.5%
State Total	240	100.0%	13.4%

Appendix A: Table 5b.

Regional Breakdown of Chronically Homeless (CH) Single Adults in Shelter, by SubCoC

BOS: Bristol	5	1.8%	31.3%
BOS: Danbury	28	10.3%	32.9%
BOS: Hartford	52	19.0%	11.6%
BOS: Middlesex	1	0.4%	1.7%
BOS: New Britain Sub-CoC	13	4.8%	14.1%
BOS: New Haven	53	19.4%	19.3%
BOS: Norwich/New London Co.	8	2.9%	7.4%
BOS: Waterbury	20	7.3%	18.9%
BOS: Remainder	28	10.3%	10.9%
ODFC: Bridgeport	11	4.0%	6.9%
ODFC: Norwalk	12	4.4%	14.5%
ODFC: Stamford-Greenwich	9	3.3%	9.5%

Appendix A: Table 6a.

Regional Breakdown of Chronically Homeless (CH) Families in Shelter, by CoC

State / Continuum of Care / Subcontinuum	Number of CH Families	Percent of All Sheltered CH Families in State	Percent of Each Region's Total Families
Balance of State	7	87.5%	2.5%
Opening Doors Fairfield County	1	12.5%	0.9%
State Total	8	100.0%	2.0%

Appendix A: Table 6b.

Regional Breakdown of Chronically Homeless (CH) Families in Shelter, by SubCoC

BOS: Bristol	0	0.0%	0.0%
BOS: Danbury	0	0.0%	0.0%
BOS: Hartford	0	0.0%	0.0%
BOS: Middlesex	0	0.0%	0.0%
BOS: New Britain Sub-CoC	0	0.0%	0.0%
BOS: New Haven	2	25.0%	3.0%
BOS: Norwich/New London Co.	0	0.0%	0.0%
BOS: Waterbury	0	0.0%	0.0%
BOS: Remainder	5	62.5%	6.8%
ODFC: Bridgeport	0	0.0%	0.0%
ODFC: Norwalk	1	12.5%	4.8%
ODFC: Stamford-Greenwich	0	0.0%	0.0%

Appendix A: Table 7a.

Adults with Health and Safety Concerns: Numbers and Percent of Region's Adults, by CoC

State / Continuum of Care / Subcontinuum	Severe Mental Illness		Chronic Substance Abuse		HIV/AIDS	
	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
Balance of State	340	19.0%	161	9.0%	28	1.6%
Opening Doors Fairfield County	70	14.3%	30	6.1%	14	2.9%
State Total	410	18.0%	191	8.4%	42	1.8%

Appendix A: Table 7b.

Adults with Health and Safety Concerns: Numbers and Percent of Region’s Adults, by SubCoC

State / Continuum of Care / Subcontinuum	Severe Mental Illness		Chronic Substance Abuse		HIV/AIDS	
	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
BOS: Bristol	4	21.1%	2	10.5%	0	0.0%
BOS: Danbury	11	11.7%	1	1.1%	4	4.3%
BOS: Hartford	95	18.9%	74	14.7%	7	1.4%
BOS: Middlesex	5	6.6%	0	0.0%	0	0.0%
BOS: New Britain Sub-CoC	27	24.3%	9	8.1%	1	0.9%
BOS: New Haven	63	17.3%	25	6.9%	5	1.4%
BOS: Norwich/New London Co.	39	24.1%	19	11.7%	4	2.5%
BOS: Waterbury	21	17.6%	5	4.2%	2	1.7%
BOS: Remainder	75	22.0%	26	7.6%	5	1.5%
ODFC: Bridgeport	29	12.5%	14	6.0%	13	5.6%
ODFC: Norwalk	18	16.8%	10	9.3%	1	0.9%
ODFC: Stamford-Greenwich	23	15.4%	6	4.0%	0	0.0%

Appendix A: Table 8a.

Adult Survivors of Domestic Violence in Emergency Shelter or Transitional Housing, by CoC

State / Continuum of Care	Number of Survivors	Percent of All Sheltered Adults in Region
Balance of State	362	20.4%
Opening Doors Fairfield County	133	26.8%
State Total	495	21.7%

Appendix A: Table 8b.

Adult Survivors of Domestic Violence in Emergency Shelter or Transitional Housing, by SubCoC

BOS: Bristol	3	15.8%
BOS: Danbury	14	14.9%
BOS: Hartford	45	9.0%
BOS: Middlesex	4	5.3%
BOS: New Britain Sub-CoC	27	24.3%
BOS: New Haven	61	16.8%
BOS: Norwich/New London Co.	52	32.1%
BOS: Waterbury	26	21.8%
BOS: Remainder	130	38.6%
ODFC: Bridgeport	70	29.4%
ODFC: Norwalk	22	20.6%
ODFC: Stamford-Greenwich	41	27.5%

**Appendix A: Table 9a.
Veterans in Emergency Shelter or Transitional Housing, by CoC**

State / Continuum of Care	Number of Veterans	Percent of All Sheltered Veterans in Region
Balance of State	131	74.0%
Opening Doors Fairfield County	46	26.0%
State Total	177	100.0%

**Appendix A: Table 9b.
Veterans in Emergency Shelter or Transitional Housing, by SubCoC**

BOS: Bristol	0	0.0%
BOS: Danbury	7	4.0%
BOS: Hartford	22	12.4%
BOS: Middlesex	0	0.0%
BOS: New Britain Sub-CoC	21	11.9%
BOS: New Haven	36	20.3%
BOS: Norwich/New London Co.	5	2.8%
BOS: Waterbury	1	0.6%
BOS: Remainder	39	22.0%
ODFC: Bridgeport	44	24.9%
ODFC: Norwalk	1	0.6%
ODFC: Stamford-Greenwich	1	0.6%

**Appendix A: Table 10a.
Chronically Homeless Veterans in Emergency Shelter or Transitional Housing, by CoC**

State / Continuum of Care	Number of Veterans	Percent of All Sheltered Veterans in Region
Balance of State	5	3.8%
Opening Doors Fairfield County	2	4.3%
State Total	7	4.0%

Appendix A: Table 10b.

Chronically Homeless Veterans in Emergency Shelter or Transitional Housing, by SubCoC

BOS: Bristol	0	0.0%
BOS: Danbury	3	42.9%
BOS: Hartford	2	9.1%
BOS: Middlesex	0	0.0%
BOS: New Britain Sub-CoC	0	0.0%
BOS: New Haven	0	0.0%
BOS: Norwich/New London Co.	0	0.0%
BOS: Waterbury	0	0.0%
BOS: Remainder	0	0.0%
ODFC: Bridgeport	1	2.3%
ODFC: Norwalk	1	0.0%
ODFC: Stamford-Greenwich	0	0.0%

Appendix B: *CT PIT 2017* Unsheltered Tables

Appendix B: Table 1.
Total Unsheltered Persons, Families Counted Statewide

Population	Number of Persons	Percent of Total Persons
Children in Families	3	0.7%
Adults in Families	1	0.2%
Single Adults	409	98.6%
Unaccompanied Children under 18	2	0.5%
Total Persons	415	100.0%
Number of Families		1

Appendix B: Table 2a.
Number of Unsheltered Persons, by Continuum of Care (CoC)

State / Continuum of Care / Subcontinuum	Children in Families	Adults in Families	Single Adults	Unaccompanied Youth under 18	Total Persons
Balance of State	3	1	328	2	334
Opening Doors Fairfield County	0	0	81	0	81
State Total	3	1	409	0	415

Appendix B: Table 2b.
Number of Unsheltered Persons, by Subcontinuum (SubCoC)

BOS: Bristol	0	0	11	–	11
BOS: Danbury	3	1	8	–	12
BOS: Hartford	0	0	39	1	40
BOS: Middlesex	0	0	36	–	36
BOS: New Britain Sub-CoC	0	0	12	–	12
BOS: New Haven	0	0	45	–	45
BOS: Norwich/New London Co.	0	0	19	–	19
BOS: Waterbury	0	0	28	–	28
BOS: Remainder	0	0	130	1	131
ODFC: Bridgeport	0	0	43	–	43
ODFC: Norwalk	0	0	11	–	11
ODFC: Stamford-Greenwich	0	0	27	–	27

Appendix B: Table 3a.
Percent of Unsheltered Persons, by CoC

State / Continuum of Care / Subcontinuum	Percent of Children in Families	Percent of Adults in Families	Percent of Single Adults	Percent of Unaccompanied Youth under 18	Percent of Total Persons
Balance of State	100.0%	100.0%	80.2%	100%	80.4%
Opening Doors Fairfield County	0.0%	0.0%	19.8%	–	19.6%
State Total	100.0%	100.0%	100.0%	100%	100.0%

Appendix B: Table 3b.
Percent of Unsheltered Persons, by SubCoC

BOS: Bristol	0.0%	0.0%	2.7%	–	2.7%
BOS: Danbury	100.0%	100.0%	2.0%	–	2.9%
BOS: Hartford	0.0%	0.0%	9.6%	50%	9.4%
BOS: Middlesex	0.0%	0.0%	8.8%	–	8.7%
BOS: New Britain Sub-CoC	0.0%	0.0%	2.9%	–	2.9%
BOS: New Haven	0.0%	0.0%	11.0%	–	10.9%
BOS: Norwich/New London Co.	0.0%	0.0%	4.6%	–	4.6%
BOS: Waterbury	0.0%	0.0%	6.8%	–	6.8%
BOS: Remainder	0.0%	0.0%	31.8%	50%	31.5%
ODFC: Bridgeport	0.0%	0.0%	10.5%	–	10.4%
ODFC: Norwalk	0.0%	0.0%	2.7%	–	2.7%
ODFC: Stamford-Greenwich	0.0%	0.0%	6.6%	–	6.5%

Appendix B: Table 4a.
Number of Unsheltered Families, by CoC

State / Continuum of Care / Subcontinuum	Number of Unsheltered Families	Percent of Unsheltered Total Families
Balance of State	1	100.0%
Opening Doors Fairfield County	0	0.0%
State Total	1	100.0%

**Appendix B: Table 4b.
Number of Unsheltered Families, by SubCoC**

BOS: Bristol	0	0.0%
BOS: Danbury	1	100.0%
BOS: Hartford	0	0.0%
BOS: Middlesex	0	0.0%
BOS: New Britain Sub-CoC	0	0.0%
BOS: New Haven	0	0.0%
BOS: Norwich/New London Co.	0	0.0%
BOS: Waterbury	0	0.0%
BOS: Remainder	0	0.0%
ODFC: Bridgeport	0	0.0%
ODFC: Norwalk	0	0.0%
ODFC: Stamford-Greenwich	0	0.0%

**Appendix B: Table 5a.
Regional Breakdown of Unsheltered Chronically Homeless (CH) Single Adults, by CoC**

State / Continuum of Care / Subcontinuum	Number of Unsheltered CH Single Adults	Percent of All Unsheltered CH Single Adults in State	Percent of Each Region's Total Single Adults
Balance of State	136	89.5%	41.5%
Opening Doors Fairfield County	16	10.5%	19.8%
State Total	152	100.0%	37.2%

**Appendix B: Table 5b.
Regional Breakdown of Unsheltered Chronically Homeless (CH) Single Adults, by SubCoC**

BOS: Bristol	3	2.0%	27.3%
BOS: Danbury	4	2.6%	50.0%
BOS: Hartford	5	3.3%	12.8%
BOS: Middlesex	16	10.5%	44.4%
BOS: New Britain Sub-CoC	4	2.6%	33.3%
BOS: New Haven	13	8.6%	28.9%
BOS: Norwich/New London Co.	9	5.9%	47.4%
BOS: Waterbury	19	12.5%	67.9%
BOS: Remainder	63	41.4%	48.5%
ODFC: Bridgeport	7	4.6%	16.3%
ODFC: Norwalk	6	3.9%	54.5%
ODFC: Stamford-Greenwich	3	2.0%	11.1%

Appendix B: Table 6a.

Regional Breakdown of Unsheltered Chronically Homeless (CH) Families, by CoC

State / Continuum of Care / Subcontinuum	Number of CH Families	Percent of All Sheltered CH Families in State	Percent of Each Region's Total Families
Balance of State	–	–	–
Opening Doors Fairfield County	–	–	–
State Total	–	–	–

Appendix B: Table 6b.

Regional Breakdown of Unsheltered Chronically Homeless (CH) Families, by SubCoC

BOS: Bristol	–	–	–
BOS: Danbury	–	–	–
BOS: Hartford	–	–	–
BOS: Middlesex	–	–	–
BOS: New Britain Sub-CoC	–	–	–
BOS: New Haven	–	–	–
BOS: Norwich/New London Co.	–	–	–
BOS: Waterbury	–	–	–
BOS: Remainder	–	–	–
ODFC: Bridgeport	–	–	–
ODFC: Norwalk	–	–	–
ODFC: Stamford-Greenwich	–	–	–

Appendix B: Table 7a.

Unsheltered Adults with Health and Safety Concerns: Numbers and Percent of Region's Adults, by CoC

State / Continuum of Care / Subcontinuum	Severe Mental Illness		Chronic Substance Abuse		HIV/AIDS	
	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
Balance of State	81	24.6%	45	13.7%	24	7.3%
Opening Doors Fairfield County	14	17.3%	4	4.9%	0	0.0%
State Total	95	23.2%	49	12.0%	24	5.9%

Appendix B: Table 7b.

Unsheltered Adults with Health & Safety Concerns: Numbers and Percent of Region's Adults, by SubCoC

State / Continuum of Care / Subcontinuum	Severe Mental Illness		Chronic Substance Abuse		HIV/AIDS	
	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
BOS: Bristol	4	36.4%	2	18.2%	0	0.0%
BOS: Danbury	2	22.2%	1	11.1%	1	11.1%
BOS: Hartford	2	5.1%	4	10.3%	0	0.0%
BOS: Middlesex	9	25.0%	5	13.9%	2	5.6%
BOS: New Britain Sub-CoC	2	16.7%	0	0.0%	1	8.3%
BOS: New Haven	12	26.7%	9	20.0%	1	2.2%
BOS: Norwich/New London Co.	5	26.3%	2	10.5%	2	10.5%
BOS: Waterbury	9	32.1%	11	39.3%	1	3.6%
BOS: Remainder	36	27.7%	11	8.5%	16	12.3%
ODFC: Bridgeport	7	16.3%	3	7.0%	0	0.0%
ODFC: Norwalk	5	45.5%	0	0.0%	0	0.0%
ODFC: Stamford-Greenwich	2	7.4%	1	3.7%	0	0.0%

Appendix B: Table 8a.

Unsheltered Adult Survivors of Domestic Violence, by CoC

State / Continuum of Care	Number of Survivors	Percent of All Unsheltered Adults in Region
Balance of State	43	13.1%
Opening Doors Fairfield County	10	12.3%
State Total	53	12.9%

Appendix B: Table 8b.

Unsheltered Adult Survivors of Domestic Violence, by SubCoC

BOS: Bristol	2	18.2%
BOS: Danbury	1	11.1%
BOS: Hartford	2	5.1%
BOS: Middlesex	8	22.2%
BOS: New Britain Sub-CoC	0	0.0%
BOS: New Haven	9	20.0%
BOS: Norwich/New London Co.	3	15.8%
BOS: Waterbury	7	25.0%
BOS: Remainder	11	8.5%
ODFC: Bridgeport	5	11.6%
ODFC: Norwalk	3	27.3%
ODFC: Stamford-Greenwich	2	7.4%

**Appendix B: Table 9a.
Unsheltered Veterans, by CoC**

State / Continuum of Care	Number of Unsheltered Veterans	Percent of All Unsheltered Adults in Region
Balance of State	12	85.7%
Opening Doors Fairfield County	2	14.3%
State Total	14	100.0%

**Appendix B: Table 9b.
Unsheltered Veterans, by SubCoC**

BOS: Bristol	0	0.0%
BOS: Danbury	0	0.0%
BOS: Hartford	1	7.1%
BOS: Middlesex	3	21.4%
BOS: New Britain Sub-CoC	0	0.0%
BOS: New Haven	1	7.1%
BOS: Norwich/New London Co.	2	14.3%
BOS: Waterbury	2	14.3%
BOS: Remainder	3	21.4%
ODFC: Bridgeport	0	0.0%
ODFC: Norwalk	1	7.1%
ODFC: Stamford-Greenwich	1	7.1%

**Appendix B: Table 10a.
Unsheltered Chronically Homeless Veterans, by CoC**

State / Continuum of Care	Number of Unsheltered CH Veterans	Percent of All Unsheltered Veterans in Region
Balance of State	5	41.7%
Opening Doors Fairfield County	1	50.0%
State Total	6	42.9%

Appendix B: Table 10b.
Unsheltered Chronically Homeless Veterans, by SubCoC

BOS: Bristol	0	0.0%
BOS: Danbury	0	0.0%
BOS: Hartford	1	100.0%
BOS: Middlesex	1	33.3%
BOS: New Britain Sub-CoC	0	0.0%
BOS: New Haven	0	0.0%
BOS: Norwich/New London Co.	1	50.0%
BOS: Waterbury	1	50.0%
BOS: Remainder	1	33.33%
ODFC: Bridgeport	0	0.0%
ODFC: Norwalk	1	100.0%
ODFC: Stamford-Greenwich	0	0.0%

Appendix C: Methodology

Sheltered Data: Methodology

Consistent and rigorous methodology ensures that the Connecticut PIT data are reliable and comparable across years, and can be used to design effective interventions to help people experiencing homelessness. Connecticut has implemented a consistent and uniform statewide methodology for CT PIT implementation since 2008.

The Sheltered Count comprised the collection of three main components: demographic or characteristic data on adults in emergency shelters and transitional housing projects; client population counts among shelters, transitional housing projects, rapid rehousing projects, permanent supportive housing projects, and shelters dedicated to serving survivors of domestic violence; and bed and unit inventory for all project types.

Collecting Client Demographics

Information on key demographic characteristics is collected from all adults staying in Connecticut's emergency shelters and transitional housing projects on the night of the count. All required data elements collected for the purposes of CT PIT have been aligned with the everyday intake assessment that all emergency shelters and transitional housing projects use to enter clients. If data were properly and fully entered for all active emergency shelter clients on the night of the count, shelters had no additional demographic data to collect. For clients staying in Department of Veterans Affairs or domestic violence projects that do not or cannot participate in CT HMIS, demographic data was collected by an anonymous paper survey.

Following *CT PIT 2013*, local university partner Dr. Stephen Adair, Professor of Sociology, Connecticut Central State University, conducted tests to assess the validity of extrapolating CT HMIS client data out to remaining non-CT HMIS participating shelters and transitional housing programs. The intention of extrapolation testing was to inform future counts as to whether or not extrapolation processes can reliably and significantly substitute where paper surveys were not completed. Results showed that extrapolation would be able to yield valid and reliable results. Just over 90 percent of eligible homeless projects in the state participate in CT HMIS. Because the vast majority of these projects enter client data into the statewide data system, a simple methodology was developed to extrapolate answer rates from participating projects to those that do not participate.

Additionally, this process is used to extrapolate information from records that are incomplete using calculations based on the number of adults compared to the number of useable surveys. A more detailed explanation of this follows.

Calculations for Subpopulations

HUD requires reporting on critical subpopulations. These categories include chronic homelessness among individuals, families, unaccompanied youth; adults with a serious mental illness; adults with a chronic substance abuse disorder; domestic violence; adults with HIV/AIDS; and chronic homelessness among veteran individuals and veteran families.

For the 2017 Point-in-Time Count, HUD provided new requirements for the reporting of Chronic Homelessness. This value is now required as part of the main populations and

agency staff report their total number of people experiencing chronic homelessness. This affects both the standard populations and the veteran subpopulations.

The HIV/AIDS subpopulation comes from adults who answered “yes” to having an HIV or AIDS diagnosis. Again, there is no requirement for any follow up questions regarding the severity or expected duration for this category.

Adults with a Serious Mental Illness data comes from all adults who answered “yes” to “Do you have a mental health problem?” and “yes” to the follow up question asking “Is this expected to be of long-continued and indefinite duration and substantially impairs your ability to live independently?”

Adults with a Chronic Substance Abuse Disorder data comes from all adults who answered “Alcohol Abuse,” “Drug Abuse,” or “Both Alcohol and Drug Abuse” to “Do you have any substance abuse issues?” and “yes” to the follow up question asking “Is this expected to be of long-continued and indefinite duration and substantially impairs your ability to live independently?”

Victims of Domestic Violence are people who answered “yes” to “Are you a victim of domestic violence?” or were in an emergency shelter or transitional housing project for domestic violence victims. Also, the calculation is only for adults who identify as Female or Transgender. Past data analysis indicated a high false positive rate when men were included in the calculation.

Extrapolation of HMIS Data to Inform Subpopulations

Although data quality in CT HMIS improves dramatically each year with extensive validation programming aimed at preventing incomplete or missing data, some extrapolation is necessary to account for imperfect data quality. The comprehensive methodology at calculating the subpopulations is as follows:

PIT 2017 Subpopulation Calculations

DV Sub Pop

Emergency Shelter and Transitional Housing Programs Only
Programs classified as serving DV are excluded from the surveys used for the Rate calculation and the population is added back at 100%

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Have a Yes answer to the questions:
 - We are conducting a survey that helps advocates to obtain funding to end homelessness. Would you like to participate?
 - Are you a victim of Domestic Violence?
- Answered the question “How do you identify your GENDER?” as Female or Transgender

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates to obtain funding to end homelessness. Would you like to participate?”
- Have a Yes or No answer to the question “Are you a victim of Domestic Violence?”
- Answered the question “How do you identify your GENDER?” as Female or Transgender

Rate for extrapolation:

$$\frac{\textit{Surveys Included}}{\textit{Surveys Useable}}$$

Extrapolation:

$$(\textit{Rate} * \textit{Number of Adults (from PIT population count excluding DV programs)}) + \textit{Number of Adults from PIT population count in DV Programs}$$

HIV Sub Pop

Emergency Shelter and Transitional Housing Programs Only

Programs classified as serving HIV are excluded from the surveys used for the Rate calculation and the population is added back at 100%

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Have a Yes answer to the questions:
 - We are conducting a survey that helps advocates to obtain funding to end homelessness. Would you like to participate?
 - Do you have HIV or AIDS?

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates to obtain funding to end homelessness. Would you like to participate?”
- Have a Yes or No answer to the question “Do you have HIV or AIDS?”

Rate for extrapolation:

$$\frac{\textit{Surveys Included}}{\textit{Surveys Useable}}$$

Extrapolation:

$$(\textit{Rate} * \textit{Number of Adults (from PIT population count excluding HIV programs)}) + \textit{Number of Adults from PIT population count in HIV Programs}$$

Substance Abuse Sub Pop

Emergency Shelter and Transitional Housing Programs Only

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Have a Yes answer to the questions:
 - We are conducting a survey that helps advocates to obtain funding to end homelessness. Would you like to participate?
 - Answered the question “Do you have any Substance Abuse Issues?” as any of Yes, Alcohol Abuse, Drug Abuse, Both Alcohol and Drug
 - Have a Yes answer to the question “If yes, is this a long-term Substance Abuse Problem that impairs your ability to hold a job or live independently?”

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates to obtain funding to end homelessness. Would you like to participate?”
- Answered the question “Do you have any Substance Abuse Issues?” as any of Yes, Alcohol Abuse, Drug Abuse, Both Alcohol and Drug, No

Rate for extrapolation:

$$\frac{\textit{Surveys Included}}{\textit{Surveys Useable}}$$

Extrapolation:

$$\textit{Rate} * \textit{Number of Adults (from PIT population count)}$$

Mental Illness Sub Pop

Emergency Shelter and Transitional Housing Programs Only

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Have a Yes answer to the questions:
 - We are conducting a survey that helps advocates to obtain funding to end homelessness. Would you like to participate?
 - Have a Yes answer to the questions:
 - * Do you have a Mental Health Problem?
 - * If yes, is this a long-term Mental Health Problem that impairs your ability to hold a job or live independently?

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates to obtain funding to end homelessness. Would you like to participate?”
- Have a Yes or No answer to the questions:
 - Do you have a Mental Health Problem?

- If yes, is this a long-term Mental Health Problem that impairs your ability to hold a job or live independently?

Rate for extrapolation:

$$\frac{\text{Surveys Included}}{\text{Surveys Useable}}$$

Extrapolation:

$$\text{Rate} * \text{Number of Adults (from PIT population count)}$$

Unsheltered Data: Statistical Models and Methodologies for an Accurate Count

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April 17, 2017

The Connecticut Coalition to End Homelessness (CCEH) partnered with Simtech Solutions, a cause-driven technology services provider, for the design and implementation of the unsheltered count methodology in support of the annual Point-in-Time Count (*CT PIT 2017*) for the State of Connecticut as required by the United States Department of Housing and Urban Development (HUD). Simtech Solutions staff focused on the development of the technical framework to support the data collection and analysis and contracted with Dan Treglia, PhD, of the University of Pennsylvania, to provide guidance and support of the sampling and enumeration strategy used to derive the final count estimates.

This final report highlights the approach, training, tools and analytical methods that were deployed during the project. It showcases CCEH's efforts to achieve a highly reliable estimation of homelessness and reflects the evolution of the project as the approach was refined. Finally, it includes additional recommendations as Connecticut looks toward the future.

The project relied on the experience and knowledge of CCEH staff and volunteers who are on the ground throughout the State as well as advanced technology and specialized knowledge. Connecticut has conducted a consistent statewide methodology for its PIT since 2008, which provided the foundation for this project. While the State of Connecticut is interested in homelessness overall, each region is also required to submit separate reports to HUD.

Preparing for the Count

Sampling Strategy

The state of Connecticut is comprised of two Continua of Care (CoC): the Balance of State CoC (CT-505) and Fairfield County (CT-503).

A stratified random sample was employed to estimate the number of unsheltered homeless individuals in each CoC. For each CoC, CCEH and PIT Regional Coordinators designated each of Connecticut’s 2,581 block groups either “high” or “low” based on the probability of finding a homeless person in that block group. All high probability areas, and a random sample of low probability areas, were canvassed during the PIT count.

Table 21: Block Groups Where Homeless Were Found in 2016

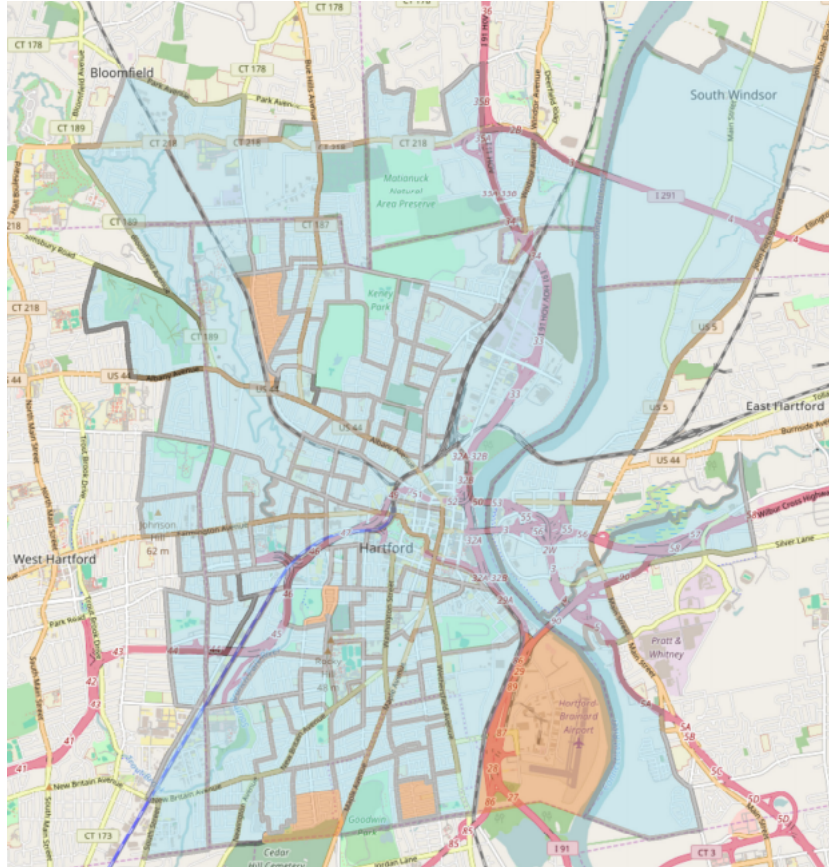
PIT Region	People Found in 2016	No one Found in 2016	Total
Bristol	7	85	92
Danbury	4	152	156
Greater Bridgeport	12	182	194
Greater Hartford	8	470	478
Hartford	10	86	96
Litchfield County	6	123	129
Meriden Wallingford	1	80	81
Middletown	4	114	118
New Britain	3	57	60
New Haven	26	81	107
New Haven East	4	124	128
New Haven North South	3	123	126
New Haven West	1	59	60
Northeast	0	120	120
Norwalk Area	6	157	163
Southeast	6	181	187
Stamford Greenwich	15	122	137
Waterbury	11	138	149
Total	127	2454	2581

Designating High Probability Block Groups

High probability designations were based on results from the previous year’s count and institutional knowledge from CCEH and PIT Regional Coordinators. CCEH provided to Simtech a list of all block groups in which at least one person was counted in 2016. Simtech used this list to provide an initial designation of the 127 block groups to be considered as high probability block groups. This designation of the block group as high probability is made regardless of whether that block group was designated or sampled in 2016, or if that block group was not intended to be canvassed at all. A list of block groups in each PIT Region indicating these high probability block groups, along with a map conveying this information, was distributed to PIT Regional Coordinators through CCEH. PIT Regional Coordinators subsequently added or removed high probability areas based on information available to them through the usage of these printed maps.

PIT Regional Coordinators added or removed designated block groups as necessary, and were permitted to add additional block groups. If a Coordinator wanted to add additional block groups, they provided justification to CCEH to ensure that the sample sizes did not exceed the capacity to recruit, train, and deploy enough canvassers. Two hundred and twenty-one block groups were added during this process which resulted in a total of 348 high probability areas to be sampled.

Figure 15: Map Provided to the Hartford PIT Regional Coordinator



Sampling Low Probability Block Groups

The low probability block groups to be canvassed were chosen through a random sample chosen from the population of block groups at the CoC level. Dan Treglia performed this task using SAS Statistical Software.

The Continuum of Care, rather than the PIT Region, was used as the basis for choosing the low probability sample to ensure that samples were large enough to be statistically valid. PIT Regions such as New Britain and New Haven West, for example, each only have a total of sixty (60) block groups, insufficient for a statistically reliable sample. Small sample sizes can result in high variance, the confidence intervals are large, and the reliability of the PIT count estimates would then be in question. This is especially true for subpopulations, like youth or veterans, where the small numbers expected to be counted could lead to artificially high or low estimates.

In addition to the aforementioned two CoC's, the former Hartford CoC was sampled separately than the remainder of the Balance of State to ensure that the counts from this largely urban area did not inflate the enumeration applied to rural/suburban areas.

Determining the Sample Size of Low Probability Block Groups

The sample size for each Continuum of Care was determined by Simtech and CCEH in consultation with PIT Regional Coordinators, with a goal of improving the accuracy of the PIT count by increasing the sample size while understanding that the logistical constraints

of finding, training, staging, and deploying canvassers across the state. Simtech used the formula below to estimate the predicted precision of the 2017 estimate, within each CoC, for any given sample size:

$$n_{LP} = \frac{1}{\frac{d^2}{N_{LP}^2 z^2 \sigma^2} + \frac{1}{N_{LP}}}$$

where: n_{LP} is the proposed sample size, d is the precision, i.e., the maximum tolerated difference between the population total number of unsheltered homeless within low probability block groups and its sample estimate; N_{LP} is the number of low probability areas for each Continuum of Care; z is the standard normal score for a desired significance level α , (for example, $z = 1.96$ for $\alpha = .05$, which corresponds to a 95% confidence level); and σ^2 is the true variance of the number of unsheltered homeless within low probability block groups. Simtech used results from prior years to estimate σ^2 , the population variance, in order to make confidence interval predictions for any given sample size.

The sample sizes for each of the three regions that were set up as unique count areas are shown below.

Table 22: Sampling Set Up for CT-502 Hartford

<i>CoC Details</i>	
Total Block Groups:	96
High Probability Block Groups:	29
Low Probability Block Groups:	67
Low Probability Sampled:	13
Low Prob Weighting Factor:	5.154

Table 23: Sampling Set Up for CT-503 Fairfield County

<i>CoC Details</i>	
Total Block Groups:	605
High Probability Block Groups:	88
Low Probability Block Groups:	517
Low Probability Sampled:	55
Low Prob Weighting Factor:	9.400

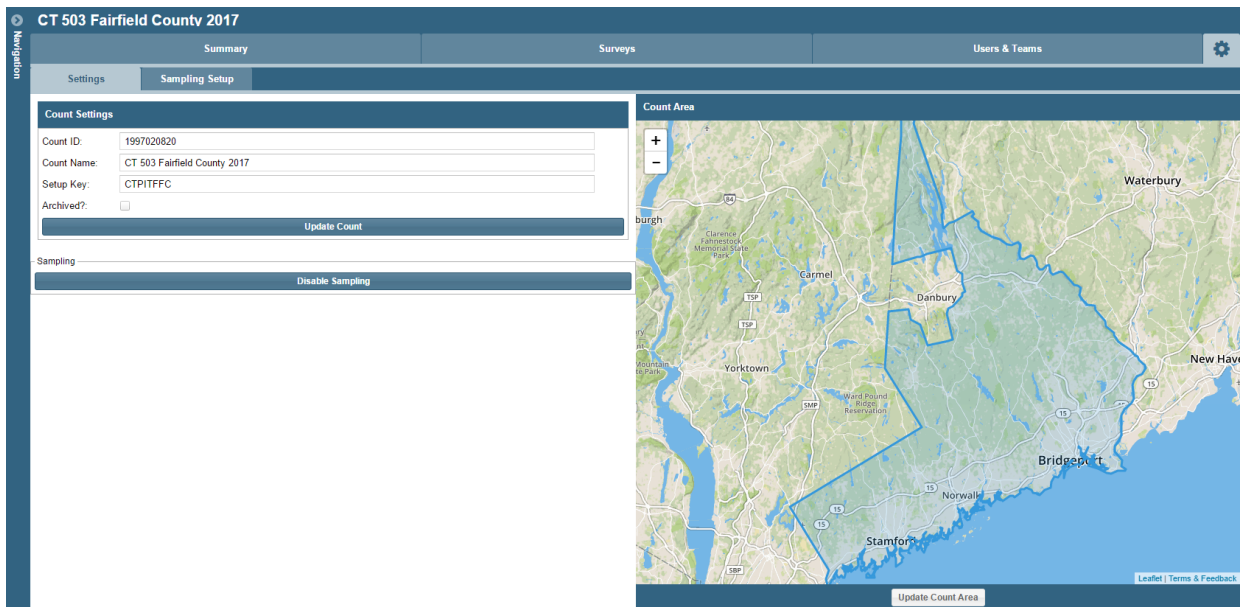
Table 24: Sampling Set Up for CT-505 Balance of State

<i>CoC Details</i>	
Total Block Groups:	1880
High Probability Block Groups:	231
Low Probability Block Groups:	1649
Low Probability Sampled:	152
Low Prob Weighting Factor:	10.849

Set up the Counts for Each Continuum of Care

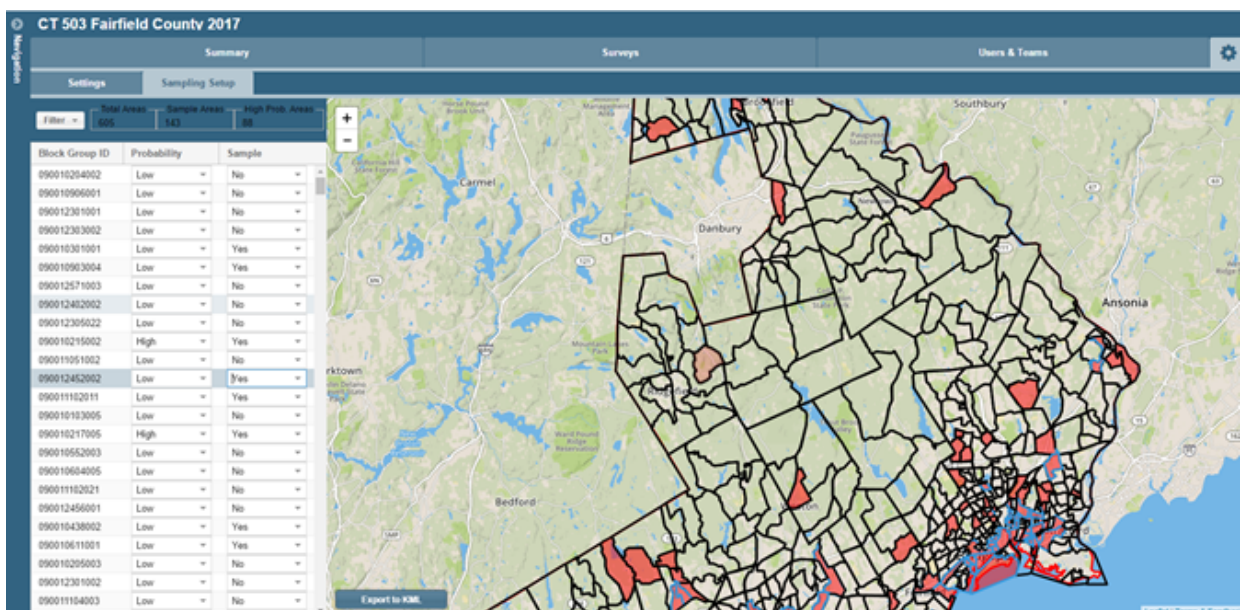
Each Continuum of Care (CoC) was set up in the Point-in-Time Regional Command Center so that it could receive survey data from the mobile app, Counting Us. This entailed defining the boundaries of the area and assigning a unique “Setup Key” which is provided to volunteers the night of the count.

Figure 16: Each CoC was Set Up to Receive Surveys within the Command Center



Count Administrator, Jacqueline Janosko, updated the block groups to indicate which are to be considered as high or low probability. All high probability block groups were designated to be sampled, along with the list of randomly sampled low probability block groups provided by Dan Treglia.

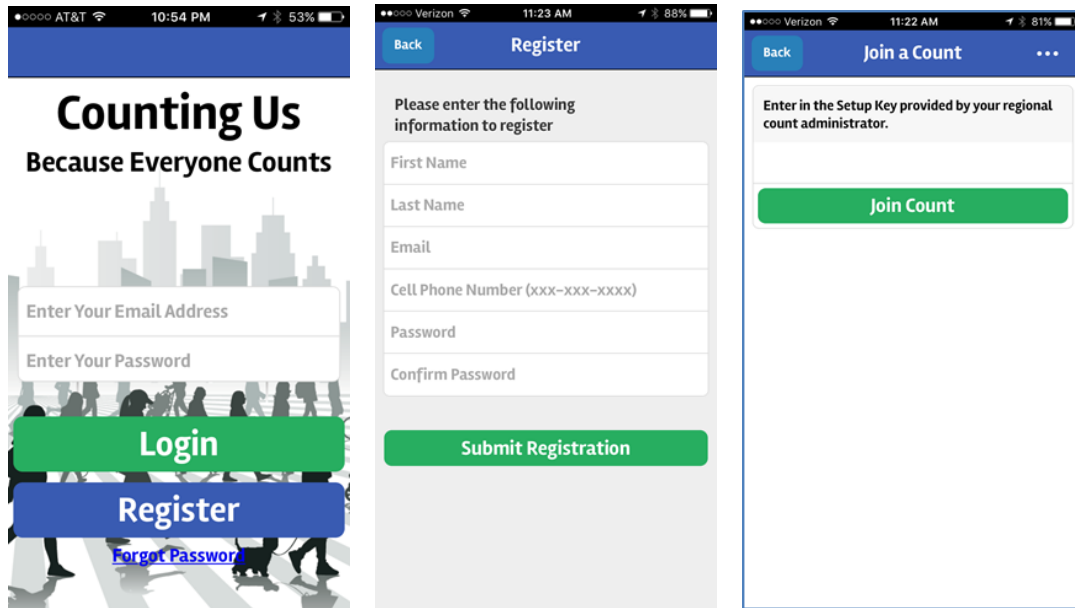
Figure 17: Block Groups were Designated as Low or High Probability, and an Indication was made as to Whether Each Should be Sampled



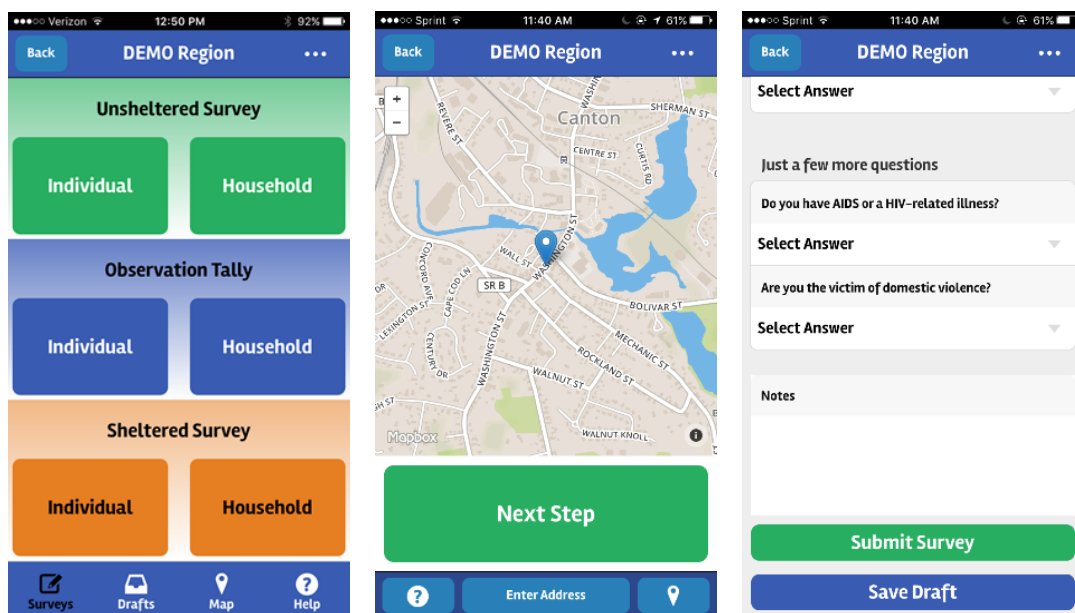
Conducting the Count

Utilization of Mobile Technology with Built-In GPS Capabilities

The 2017 PIT Count was the second year that Connecticut used mobile technology developed by Simtech Solutions to help automate the count process. Volunteers downloaded the Counting Us app from either Google Play or the iTunes App Store, registered an account, and joined the appropriate count by entering a specific Setup Key attributed to the count project for which they were volunteering.



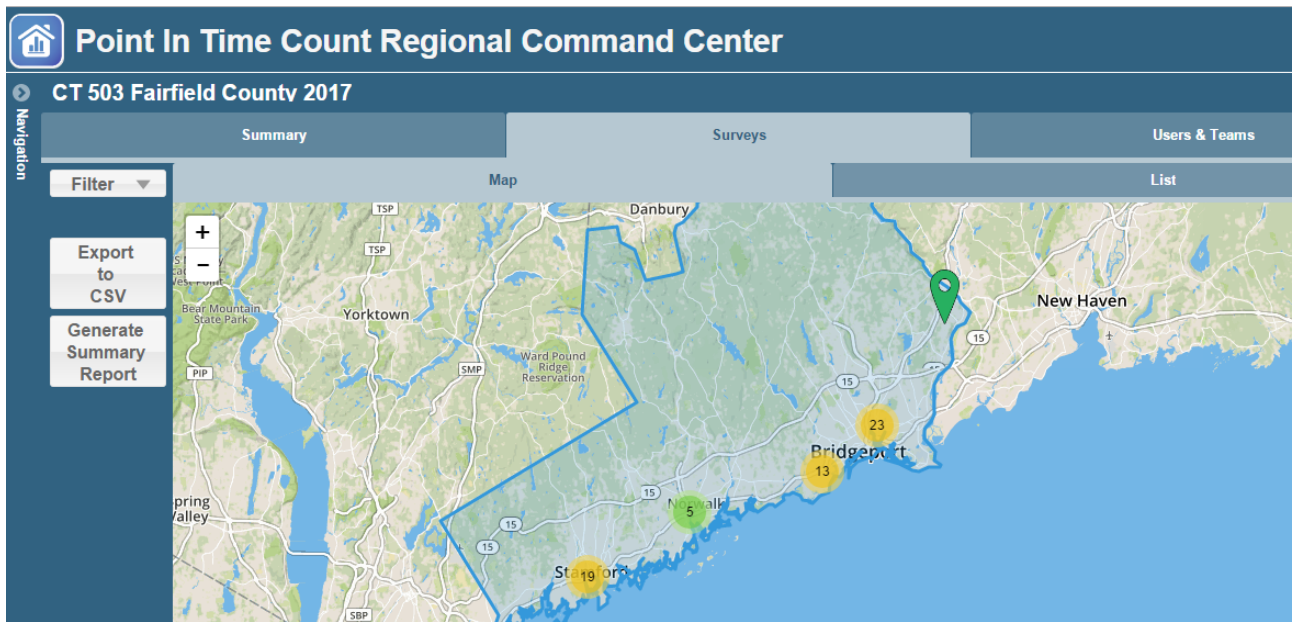
The Counting Us app includes three types of surveys that can be administered to individuals or households. The survey questions include such demographic information as age, race, and gender as well as information on veteran status, disabling conditions, length of homelessness, and other questions that are included in the final PIT report that is submitted to HUD. A key feature of the Counting Us app is the built-in GPS functionality that pinpoints the exact physical location that each survey was conducted. This feature works with the maps and shape files that are in the Command Center.



Count Activities were Monitored in Real-Time

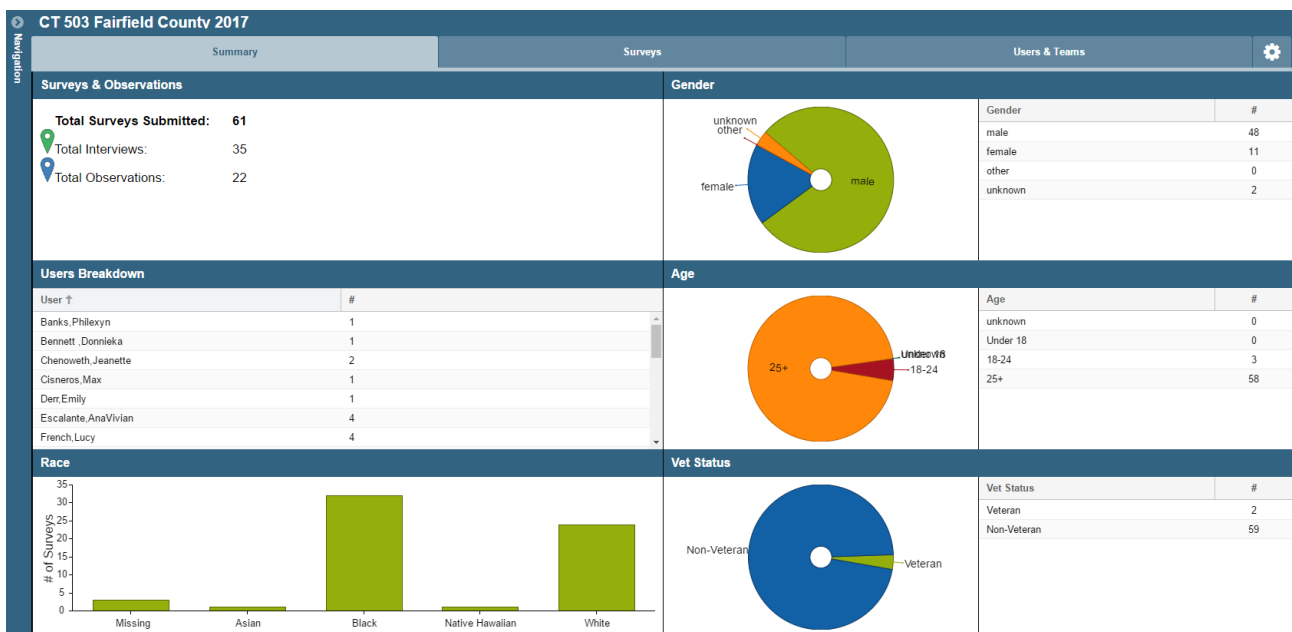
The Point-in-Time Regional Command Center was used to receive survey data that was submitted by volunteers using the Counting Us mobile app, in real time. The map view from within the Command Center shows the location of each survey that has been conducted. Count Administrators were able to contact volunteers on their smart phones if any surveys were conducted outside of their designated count area.

Figure 18: Count Administrators Watch the Activities of Count Volunteers in Real-Time



Results were updated in real-time throughout the count and displayed on a dashboard found within the Command Center.

Figure 19: Dashboard View of Key Demographic Information Collected by Count Volunteers



Deriving the Final Count Estimates

Total Estimate

Sampling weights, estimates, and confidence intervals were applied differently to high and low probability block groups in order to produce final estimates. Because CCEH conducted a census of high probability block groups, there are no sample weights or confidence intervals. For low probability areas, the average number of individuals counted in each sampled block group within each Continuum of Care was applied to the universe of low probability areas within that CoC. This is mathematically equivalent to applying a sample weight based on the proportion of sample areas chosen.

In order to ensure the methodological rigor of the PIT estimate, only those individuals encountered in areas designated as high probability or as part of the sample of low probability block groups to be counted were included in the results calculation. Individuals counted outside of the boundaries of block groups to be canvassed were not included in the results as doing so would have removed the randomness of the random sample. In total, there were twenty-three (23) surveys excluded, conducted in eighteen (18) block groups. These block groups will be recorded for inclusion in designated areas for *CT PIT 2018*.

CoC CT-503 has 605 total block groups. Eighty-eight were designated as high probability, and 517 were therefore low probability. All 88 of the high probability block groups were canvassed, along with a sample of 55 of the 517 low probability block groups; 54 individuals were counted in the high probability areas, and two (2) were counted in the 55 low probability areas. The sampling set up for the three counts can be found in Table 22, Table 23, and Table 24.

Table 25: Block Group Designations for CT-503

CoC Details	
Total Block Groups:	605
High Probability Block Groups:	88
Low Probability Block Groups:	517
Low Probability Sampled:	55
Low Prob Weighting Factor:	9.400

Table 26: Estimated Number of Homeless in CT-503 for the Night of the 2017 Point-in-Time Count

Households and Age Breakdown	High	Low	Low-Extrap.	CoC Total
Total Number of Households	54	2	19	73
Total Number of Persons (Adults)	54	2	19	73
Number of Persons (age 18-24)	2	1	9	11
Number of Persons (over age 24)	52	1	9	61

The Weighting Factor (9.4) used to estimate the total number of homeless in the low probability areas was derived by dividing the total number of low probability block groups

(517) by the total number of low probability block groups that were sampled (55). With only 2 people surveyed this resulted in an estimated 18.8 people for all low probability block groups, which was subsequently rounded to 19. The total estimated count for the region of 73 was derived by adding the estimate from the low probability block groups (19) to the total counted in the high probability block groups (54).

PIT Region, CAN, and Sub-CoC Estimates

Estimates at the PIT Region, Coordinated Access Network (CAN), and Sub-CoC were based on the number of individuals counted in high probability block groups in that region as well as the weighted average number of individuals estimated in the low probability sample. Complete HUD Point-in-Time Reports were produced for each of these region types.

Since the number of block groups within the sub-regions represents an insufficient sample size for the purposes of estimations, the estimates for these sub-regions was based on the estimates derived at the CoC level. In order to accomplish this, the overall percentage of low probability block groups that exist within the sub-region must first be calculated. The example in Table 27 shows that the Greater Hartford CAN contains 516 low probability block groups whereas the Balance of State CoC contains 1,649. Therefore, the percentage of low probability block groups for the CoC that exist within the Greater Hartford CAN is 516/1,649 or 31.29%.

Table 27: Determining the Percentage of Low Probability Block Groups within the Sub-Region

<i>Geographic Information for the Selected Region</i>			
<i>CoC Details</i>		<i>Sub-Region Details</i>	
Total Block Groups:	1880	Total Block Groups:	574
High Probability Block Groups:	231	High Probability Block Groups:	58
Low Probability Block Groups:	1649	Low Probability Block Groups:	516
Low Probability Sampled:	152	Low Probability Sampled:	55
Low Prob Weighting Factor:	10.849	Sub-Region % of CoC Low BGs:	31.29%

Deriving the overall estimates for the sub-region is a two-step process. First, all count figures from the high probability block groups are counted without any adjustment. The second step is to derive the estimated counts for the low probability block groups. This is done by multiplying the estimated figures from the low probability block groups for the entire CoC by the percentage of low probability block groups for the CoC that exist within the sub-region. Continuing to use Greater Hartford CAN as an example, the estimated number of households for the sub-region is shown in Table 28. Five (5) households counted in high probability block groups plus 98 households counted across the entire CoC multiplied by the 31.29% calculated above. This results in a total estimated number of households of 36.

Table 28: Estimated Count Figures for the Greater Hartford CAN

Households and Age Breakdown	High	Low	Low-Extrap.	CoC Total	Sub-Region High	Sub-Region Low	Sub-Region Total
Total Number of Households	154	9	98	252	5	31	36
Total Number of Persons (Adults)	159	11	119	278	5	37	42
Number of Persons (age 18-24)	11	1	11	22	0	3	3
Number of Persons (over age 24)	148	10	108	256	5	34	39

Youth Count: Methodology Report

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March 21, 2017

The estimate of the total number of homeless or unstably housed youth in Connecticut is 4,188, of which an estimated 34 percent or 1,432 people are homeless and 2,756 are unstably housed.

Counting youth (people under 25) that are homeless or unstably housed is challenging. Young people rarely use shelters, nor do they tend to congregate or sleep in the same places as the adult, homeless population. Instead, they may stay with friends, couch surf, or find other alternatives. Almost certainly in the annual Point-in-Time counts of the homeless, youth are undercounted.

In conjunction with, but separate from, *CT PIT 2017*, CCEH, over the course of a week, used a variety of methods in selected areas in an attempt to survey youth who were homeless or unstably housed. Since the areas were deliberately (rather than randomly) selected, it is difficult to make estimates of the size of this population across the state. Several assumptions were made to make this estimate.

HMIS data of all people who entered a homeless shelter in Connecticut in 2016 were used to create a rate of homelessness for the 169 cities and towns in Connecticut. Of the roughly 7,500 people who spent at least one night in a shelter, 6,620 people reported a last address in a city or town in Connecticut. The population size for all the cities and towns were identified from the 2010 census, so that a relative rate of homelessness per 1,000 could be established for each city and town. See Table 31.

Overall, 6,620 homeless people in a population of roughly 3.5 million provides an overall rate of about 1.87 people for every 1,000 in the population. The highest rate of 10.92 per 1,000 was found in Hartford, followed by New London at 8.98 and New Haven at 7.21.

The actual number of homeless people is certainly some fraction higher than 6,620, as this does not include people who did not report to a shelter or who left the state. This undercounting, however, is likely not a significant problem for the youth estimate because the rates are likely accurate as relative rates assuming that the rate of people who become homeless who do not find their way to a Connecticut shelter does not vary much from one town to another.

Of the 169 cities and towns, 27 were not represented at all among the 6,620 people who were sheltered. Since the risk of becoming homeless in any community cannot be zero, the rate for these towns was assumed to be .2 per 1,000 (or one person for every 5,000). There are very few cities and towns with rates below .2. If this estimate was changed to .1 per 1,000 or .5 per 1,000, it had a very small impact on the estimate of the total number.

In the *2017 CT Youth Count!*, 439 youth were surveyed. One hundred and forty-nine were homeless (34 percent), and 290 were unstably housed. The cities and towns in which the

greatest number of youth were counted were selected, see Table 29. Among these, seven cities seemed to have provided the most robust youth counts based on anecdotal reports and the following were selected: Bridgeport, Danbury, Hartford, Norwich, Stamford, Torrington, and Waterbury. The number of youth counted in the youth survey were compared with the number that reported to a shelter in 2016. These ratios respectively for the seven cities would be .10, .62, .04, .21, .06, .30, and .08.

Table 29: Youth Surveyed vs. Reported to Shelter

Origin city for people who reported to a shelter in 2017	Number of Homeless	Population of City	Percentage of population that reported to a shelter	Number counted in Youth Count	Ratio of number counted in Youth Count to number that reported to a shelter or column S/Column P
Bridgeport	504	144,229	3.49	50	0.099
Bristol	123	60,477	2.03	11	0.089
Danbury	75	80,893	0.93	47	0.627
Hartford	1362	124,775	10.92	58	0.043
Meriden	182	60,868	2.99	13	0.071
New Britain	301	73,206	4.11	10	0.033
New Haven	936	129,779	7.21	33	0.035
New London	248	27,620	8.98	26	0.105
Norwalk	199	85,603	2.32	12	0.060
Norwich	140	40,493	3.46	30	0.214
Stamford	303	122,643	2.47	19	0.063
Torrington	66	36,383	1.81	20	0.303
Waterbury	387	110,366	3.51	23	0.059

We can be certain that all of the homeless or unstably housed youth were not captured in this effort, and estimating the percentage that were captured is the most tenuous feature of this estimate. The number for Danbury, however, seemed like a plausible estimate. Reports indicated that the efforts in Danbury were particularly strong. It would suggest that in Torrington, about half of the homeless and unstably housed were captured, and about one third in Norwich.

Multiplying the rate of adult homelessness in each city and town by .627 (and dividing by 1,000) provides an estimate of the number of homeless in that community. See Table 31. The next column, Estimate Number of Homeless Youth, shows the estimate number of homeless youth or the actual number of surveys completed in the youth count. The total from Table 30 provides the estimate of 4,188 reported here.

Table 30: Total Estimate

Estimate Number of Homeless	1432
Estimate Unstably Housed	2756
Total	4188

This produces an estimated total count of 4,188 with 1,432 youth being homeless and 2,756 being unstably housed.

Table 31: Relative Rate of Homelessness by City

City and Town	Homeless	2010 Population	# Homeless per 1000	Estimate Number of Homeless Youth
Andover	0	3303	0.00	0.4141962
Ansonia	18	19,249	0.94	11.286
Ashford	1	4317	0.23	0.627
Avon	0	18098	0.00	2.2694892
Barkamsted	1	3799	0.26	0.627
Beacon Falls	1	6049	0.17	0.7585446
Berlin	8	19866	0.40	5.016
Bethany	1	5563	0.18	0.6976002
Bethel	5	9549	0.52	3.135
Bethlehem	1	3607	0.28	0.627
Bloomfield	27	20486	1.32	16.929
Bolton	0	4980	0.00	0.624492
Bozrah	1	2627	0.38	0.627
Branford	9	28026	0.32	5.643
Bridgeport	504	144,229	3.49	316.008
Bridgewater	0	1727	0.00	0.2165658
Bristol	123	60477	2.03	77.121
Brookfield	1	16,452	0.06	2.0630808
Brooklyn	17	8210	2.07	10.659
Burlington	0	9301	0.00	1.1663454
Canaan	4	1234	3.24	2.508
Canterbury	3	5132	0.58	1.881
Canton	7	10,292	0.68	4.389
Chaplin	2	2305	0.87	1.254
Cheshire	12	29,261	0.41	7.524
Chester	0	3994	0.00	0.5008476
Clinton	6	13,260	0.45	3.762
Colchester	13	16,068	0.81	8.151
Colebrook	0	1,485	0.00	0.186219
Columbia	3	5,485	0.55	1.881
Cornwall	1	1,420	0.70	0.627
Coventry	5	12,435	0.40	3.135
Cromwell	5	14,005	0.36	3.135
Danbury	75	80,893	0.93	47.025
Darien	2	20,732	0.10	2.5997928
Deep River	0	4,629	0.00	0.5804766
Derby	10	12,902	0.78	6.27

City and Town	Homeless	2010 Population	# Homeless per 1000	Estimate Number of Homeless Youth
Durham	1	7,388	0.14	0.9264552
Eastford	1	1,749	0.57	0.627
East Granby	1	5,148	0.19	0.6455592
East Haddam	0	9,126	0.00	1.1444004
East Hampton	5	12,959	0.39	3.135
East Hartford	163	51,252	3.18	102.201
East Haven	32	29,257	1.09	20.064
East Lyme	23	19,159	1.20	14.421
Easton	0	7,490	0.00	0.939246
East Windsor	5	11,162	0.45	3.135
Ellington	3	15,602	0.19	1.9564908
Enfield	41	44,654	0.92	25.707
Essex	1	6,683	0.15	0.8380482
Fairfield	16	59,404	0.27	10.032
Farmington	10	25,340	0.39	6.27
Franklin	1	1,922	0.52	0.627
Glastonbury	5	34,427	0.15	4.3171458
Goshen	0	2,976	0.00	0.3731904
Granby	3	11,282	0.27	1.881
Greenwich	12	61,171	0.20	7.6708434
Griswold	16	11,951	1.34	10.032
Groton	71	10,389	6.83	44.517
Guilford	6	22,375	0.27	3.762
Haddam	1	8,346	0.12	1.0465884
Hamden	59	60,960	0.97	36.993
Hampton	1	1,863	0.54	0.627
Hartford	1362	124,775	10.92	853.974
Hartland	0	2,114	0.00	0.2650956
Harwinton	1	5,642	0.18	0.7075068
Hebron	2	9,686	0.21	1.254
Kent	0	2,979	0.00	0.3735666
Killingly	58	17,370	3.34	36.366
Killingworth	2	6,525	0.31	1.254
Lebanon	11	7,308	1.51	6.897
Ledyard	2	15,051	0.13	1.8873954
Lisbon	0	4,338	0.00	0.5439852
Litchfield	2	8,466	0.24	1.254

City and Town	Homeless	2010 Population	# Homeless per 1000	Estimate Number of Homeless Youth
Lyme	0	2,406	0.00	0.3017124
Madison	4	18,269	0.22	2.508
Manchester	144	58,241	2.47	90.288
Mansfield	3	26,543	0.11	3.3284922
Marlborough	3	6,404	0.47	1.881
Meriden	182	60,868	2.99	114.114
Middlebury	0	7,575	0.00	0.949905
Middlefield	1	4,425	0.23	0.627
Middletown	116	46,648	2.49	72.732
Milford	28	52,759	0.53	17.556
Monroe	4	19,479	0.21	2.508
Montville	13	19,571	0.66	8.151
Morris	1	2,388	0.42	0.627
Naugatuck	20	31,862	0.63	12.54
New Britain	301	73,206	4.11	188.727
New Canaan	0	19,738	0.00	2.4751452
New Fairfield	2	13,881	0.14	1.7406774
New Hartford	2	6,970	0.29	1.254
New Haven	936	129,779	7.21	586.872
New London	248	27,620	8.98	155.496
New Milford	6	28,142	0.21	3.762
Newington	19	30,562	0.62	11.913
Newtown	6	27,560	0.22	3.762
Norfolk	0	1,709	0.00	0.2143086
North Branford	1	14,407	0.07	1.8066378
North Canaan	0	3,315	0.00	0.415701
North Haven	5	24,093	0.21	3.135
North Stonington	4	5,297	0.76	2.508
Norwalk	199	85,603	2.32	124.773
Norwich	140	40,493	3.46	87.78
Old Lyme	6	7,603	0.79	3.762
Old Saybrook	0	10,242	0.00	1.2843468
Orange	1	13,956	0.07	1.7500824
Oxford	3	12,683	0.24	1.881
Plainfield	27	15,405	1.75	16.929
Plainville	18	17,716	1.02	11.286
Plymouth	20	12,243	1.63	12.54

City and Town	Homeless	2010 Population	# Homeless per 1000	Estimate Number of Homeless Youth
Pomfret	1	4,247	0.24	0.627
Portland	7	9,508	0.74	4.389
Preston	2	4,726	0.42	1.254
Prospect	2	9,405	0.21	1.254
Putnam	21	9,584	2.19	13.167
Redding	0	9,158	0.00	1.1484132
Ridgefield	0	24,638	0.00	3.0896052
Rocky Hill	11	17,966	0.61	6.897
Roxbury	0	2,262	0.00	0.2836548
Salem	1	4,151	0.24	0.627
Salisbury	3	3,741	0.80	1.881
Scotland	2	1,726	1.16	1.254
Seymour	4	16,540	0.24	2.508
Sharon	3	2,782	1.08	1.881
Shelton	10	39,559	0.25	6.27
Sherman	0	3,581	0.00	0.4490574
Simsbury	7	23,511	0.30	4.389
Somers	16	11,444	1.40	10.032
Southbury	0	19,904	0.00	2.4959616
Southington	18	43,069	0.42	11.286
South Windsor	8	25,709	0.31	5.016
Sprague	7	2,984	2.35	4.389
Stafford	6	12,087	0.50	3.762
Stamford	303	122,643	2.47	189.981
Sterling	4	3,830	1.04	2.508
Stonington	16	18,545	0.86	10.032
Stratford	36	51,384	0.70	22.572
Suffield	7	15,735	0.44	4.389
Thomaston	5	7,887	0.63	3.135
Thompson	6	9,458	0.63	3.762
Tolland	6	15,052	0.40	3.762
Torrington	66	36,383	1.81	41.382
Trumbull	6	36,018	0.17	4.5166572
Union	0	854	0.00	0.1070916
Vernon	51	29,179	1.75	31.977
Voluntown	2	2,603	0.77	1.254
Wallingford	21	45,135	0.47	13.167

City and Town	Homeless	2010 Population	# Homeless per 1000	Estimate Number of Homeless Youth
Warren	0	1,461	0.00	0.1832094
Washington	2	3,578	0.56	1.254
Waterbury	387	110,366	3.51	242.649
Waterford	21	19,517	1.08	13.167
Watertown	3	22,514	0.13	2.8232556
Westbrook	0	6,938	0.00	0.8700252
West Hartford	36	63,268	0.57	22.572
West Haven	93	55,564	1.67	58.311
Weston	3	10,179	0.29	1.881
Westport	13	26,391	0.49	8.151
Wethersfield	22	26,668	0.82	13.794
Willington	1	6,041	0.17	0.7575414
Wilton	3	18,062	0.17	2.2649748
Winchester	19	11,242	1.69	11.913
Windham	61	25,268	2.41	38.247
Windsor	25	29,044	0.86	15.675
Windsor Locks	9	12,498	0.72	5.643
Wolcott	9	16,680	0.54	5.643
Woodbridge	1	8,990	0.11	1.127346
Woodbury	4	9,975	0.40	2.508
Woodstock	4	7,964	0.50	2.508
Total	6620	3532593	1.87	4188